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# C & D

## CHEMIST AND DRUGGIST

ESTABLISHED 1859

THE WEEKLY NEWSPAPER FOR PHARMACY and all sections of the drug, pharmaceutical, fine chemical, cosmetics, and allied industries

Official organ of the Pharmaceutical Society of Ireland and of the Pharmaceutical Society of Northern Ireland

Volume 186

October 15, 1966

No. 4522

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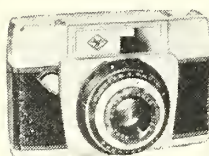
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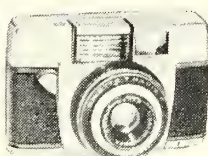
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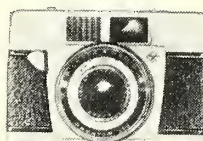
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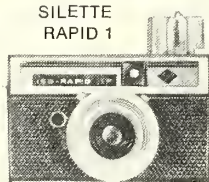
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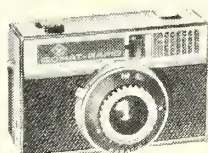
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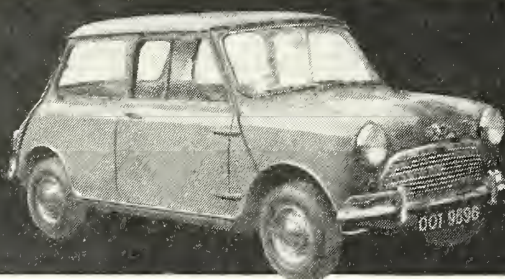
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# C & D

## CHEMIST AND DRUGGIST

Volume 186

OCTOBER 15 1966

No. 4522

## Purchase Tax

### PROVISION OF EXPORT SCHEMES

THE Commissioners of Customs and Excise have announced the introduction of the Small Exporters' Scheme and an extension of the Personal Export Scheme.

The new Small Exporters' Scheme is available for the benefit of traders who are not registered for purchase tax purposes and who receive from abroad orders in writing from an overseas customer for goods to be delivered to an address abroad. The scheme operates in a similar manner as for exports as freight or by post, under the personal export scheme. Arrangements whereby an unregistered trader can have an export order despatched on his behalf by his registered supplier from untaxed stock continue in force, but where those are unsuitable, unregistered traders may meet orders for goods in retail or wholesale quantities from taxed stock and claim relief on Form PT40X by way of credit for tax from their registered supplier. The scheme does not extend to goods, for example gifts, ordered for export by persons permanently resident in this country, nor does it apply to registered traders. Such traders who cannot fulfil an export order from untaxed stock, may export any goods (other than motor vehicles) from stock which has already borne tax provided the goods are ordered in writing from abroad by an overseas customer. Form P.T.40X or 40 should not be used but on obtaining the appropriate evidence of exportation the trader may take credit in his tax account for the tax involved. The Personal Export Scheme, under which overseas visitors and other eligible persons may purchase goods in the United Kingdom free of purchase tax, for exportation as baggage, freight or by post, is extended. A member of the British armed forces in Germany, or of the services ancillary thereto, or of his family, is now entitled to use the Scheme provided he is proceeding abroad on a posting for a continuous period of at least 12 months.

The limitation of the Scheme to purchase of goods of a total value of £5 or more is removed, as is the limitation to personal or household goods, but motor vehicles, for which there are special procedures, are still excluded. The Scheme no longer excludes goods purchased for trade purposes. Further details may be obtained from local Customs and Excise officials.

### Scots and N.P.U.

#### SIXTH JOINT AREA MEETING

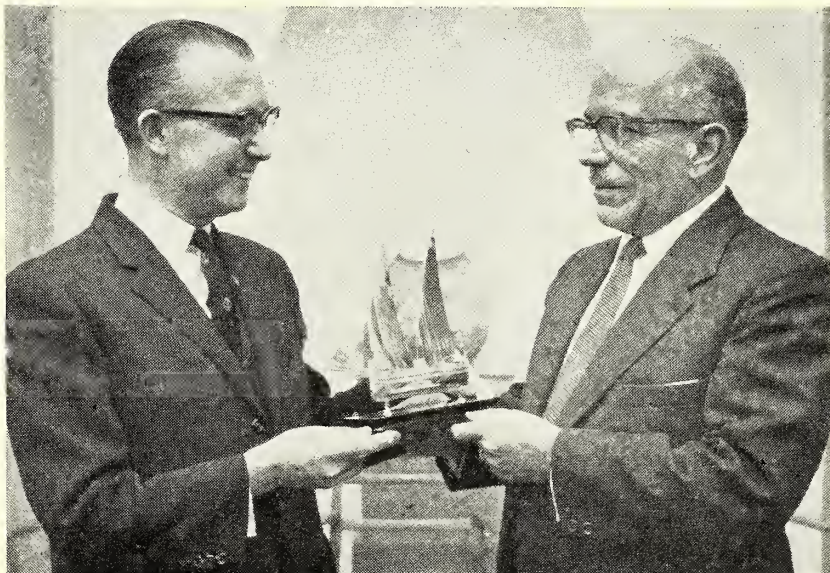
A MEETING of members of the Scottish Pharmaceutical Federation and the National Pharmaceutical Union was held at the Eglinton Arms hotel, Irvine, Ayrshire, on October 6. Chairman for the meeting was Mr. S. M. Woods (a member of the S.P.F. Executive) and the speakers were Mr. R. Donald (chairman of the Federation) and Mr. J. Crawford Lamb (vice-chairman). The meeting, the sixth in a series, closely followed the pattern of the previous meeting held in Aberdeen (see *C. & D.*, October 8, p. 344). Mr. Lamb spoke first and covered the history of the link up with the N.P.U. and the benefits to Scottish pharmacists deriving from that close link. Mr. R. Donald dealt with marketing problems and stressed the importance of sponsored goods in meeting competition. He dealt also with possible legislation

to confine the sale of drugs and medicines to pharmacists. Such legislation could not be expected in the near future—and that competition must be met by other means. In discussion it became clear that members believed that the normal training courses for shop assistants were totally unsuitable for pharmacy and they hoped that the N.P.U. would be successful in negotiating really suitable courses of instructions for the training colleges. Members expressed the view that the development of planned distribution of pharmacies would have to be treated with great care. A vote of thanks to the two speakers was proposed by Mr. A. Cockburn.

### Shopping Facilities

#### COMMITTEE TO INVESTIGATE NEEDS

THE Economic Development Committee for the Distributive Trades has set up a new sub-committee to study the size and pattern of future shopping capacity in Great Britain. The committee is concerned that shopping centre redevelopment schemes currently being considered will lead to the provision of more shops in total than can be economically utilised, while some areas may lack adequate facilities. The committee has also been concerned



**FROM MALTA TO GREAT BRITAIN.**—Mr. A. M. Dermenia, (president of the Malta Union of Pharmacists), presents a silver model of a Maltese sailing vessel, a dghaisa—to Mr. J. C. Bloomfield (president of the Pharmaceutical Society of Great Britain). The gift is inscribed: From the pharmacists of Malta to The Pharmaceutical Society of Great Britain, as a token of friendship. Mr. Dermenia, chief pharmacist of Malta's medical and health department, last visited Britain in 1946, when, as a British Council scholar, he studied for a year at the Society's school.



about the apparent lack of consultation on size and location of shopping development schemes. The new sub-committee's terms of reference require it to find out what work is being done in government departments, universities and private companies indicating the future pattern and capacity of shopping, to try to assess the pattern and capacity in 10 to 20 years time, assuming legislation is unchanged; to consider what pattern and capacity would provide the best use of resources and the greatest convenience to consumers; and to see what implications these studies have for physical and economic planning policies.

## Drug Dependence

### ONE PROBLEM WITH ACOHOLISM

A WORLD Health Organisation expert committee met in Geneva, October 4-10, to discuss services for the treatment and prevention of dependence on alcohol and other drugs. The meeting follows approaches by a number of countries for advice on how to set up such services which for the first time faced W.H.O. with questions of dependence on alcohol, and dependence on other drugs, as a single problem. The new attitude has been brought about by a sudden rise in alcoholism in countries where narcotic addiction used to be rife; increasing dependence on drugs, including the so-called "minor-drugs" of addiction, particularly among young people; use of alcohol and the drugs in combination; and transfer from one drug of addiction to another. In the case of alcoholism, public and official attitudes have changed appreciably and tend to view the condition more as a disease than a crime. That view has yet to be extended to drug abuse.

## Industrial Design

### COUNCIL COMES OF AGE

KEYNOTE of the twenty-first annual report of the Council of Industrial Design published recently, was the prospect it held out of a "decade of British ascendancy in design in the 1970's, if British industry and commerce could be properly awakened to the role of the designer in an increasingly competitive world." The report refers to a fast developing technology, an effective pattern of design education, a more demanding mass market, a vigorous consumer movement and an incipient recognition by business management that design problems demand professional solution. From 1967 a new series of Council of Industrial Design awards replaces the annual Design Centre awards. It will include awards to both capital and consumer goods. Theme for the Council's fourth International Design Congress planned for next month is "Profit by Design." The year's attendance at the Design Centre was 877,395 (a daily average of 2,821). During the year 115 firms joined the Design Centre label scheme and 8 million labels were sold. During the year an exhibition "Operation Design" demonstrated the scope for design in British hospital and medical equipment.

## Drug Research Society

### OFFICERS AND COMMITTEE

THE following officers and committee were appointed at the inaugural meeting of the Society for Drug Research on September 28 (see C. & D., October 1, p. 316), *Chairman*, Professor N. J. Harper, (University of Aston in Birmingham); *Deputy chairman*, R. G. W. Spickett, (Allen and Hanburys, Ltd.); *Treasurer*, J. F. Cavalla (John Wyeth &

Brother, Ltd.); *Secretary*, Alma B. Simmonds, (Chelsea College of Science and Technology, University of London); *Committee*, Professor A. H. Beckett, (Chelsea College of Science and Technology, University of London), R. E. Bowman (Parke, Davis & Co.), A. F. Crowther, (Imperial Chemical Industries, Ltd., Pharmaceutical Division), D. J. Drain, (Smith & Nephew Research, Ltd.), W. H. Hunter, (Chelsea College of Science and Technology, University of London), D. Jack, (Allen and Hanburys, Ltd.), M. D. Mehta, (Beecham Research Laboratories), A. M. Roe, (Smith, Kline and French Laboratories, Ltd.), T. I. Wrigley (Pfizer, Ltd.).

## Diabetes and the Heart

### GRANT AIDS FURTHER STUDY

A GRANT of just over £5,500 from the Wellcome Trust will provide equipment for one aspect of a study of the relationship between diabetes and heart disease being carried out by Dr. H. Keen (Guy's Hospital Medical School, London). The Guy's unit at Bedford has established a link between unrecognised diabetes and heart disease in 250 borderline diabetics. It is planned to include that study in a survey of 16,000 employees of the G.P.O. to obtain information on cardiovascular disease. Dr. Keen says that in the general population there are strong indications to suggest that mild to moderate degrees of unsuspected diabetes are unexpectedly common and are associated with abnormally high circulating levels of insulin and with raised levels of fat in the blood. The relationship between the two provides a reasonably sound working hypothesis to explain, at least in part, the high prevalence of heart disease in the community.

## APPROVED NAMES

### A new supplementary list

THE following supplementary list of approved names has been issued by The British Pharmacopoeia Commission:

APPROVED NAME	OTHER NAMES
Beclomethasone dipropionate	9 $\alpha$ -Chloro-11 $\beta$ , 17 $\alpha$ , 21-tri-hydroxy-16 $\beta$ -methylpregna-1,4-diene-3,20-dione dipropionate
Etymide	9 $\alpha$ -Chloro-16 $\beta$ -methylprednisolone dipropionate $\alpha$ -Ethoxy-N-methyl-N-[2-(N-methylphenethylamino)ethyl] diphenylacetamide, (SQ 10269 is the hydrochloride)
Fanthridone	5-(3-Dimethylaminopropyl) phenanthridone (AGN 616 is the hydrochloride)
Fluanisone	4'-Fluoro-4-[4-(2-methoxyphenyl)-1-piperazinyl] butyropenone
Flucloxacillin	3-(2-Chloro-6-fluorophenyl)-5-methyl-isoxazol-4-ylpenicillin
Fluorometholone	9 $\alpha$ -Fluoro-11 $\beta$ , 17 $\alpha$ -dihydroxy-6 $\alpha$ -methylpregna-1,4-diene-3,20-dione
Hetacillin	6-(2,2-Dimethyl-5-oxo-4-phenylimidazolidin-1-yl)penicillanic acid
Iopydol	N-(2,3-Dihydroxypropyl)-3,5-di-iodo-4-pyridone (Present in Hytrast)

Iopydone	3,5-Di-iodo-4-pyridone (Present in Hytrast)
Mikamycin	An antibiotic produced by <i>Streptomyces mitakaensis</i> (Mikamycin B is Ostreogrycin B)
Mitotenamine	5-Bromo-3-[N-(2-chloroethyl) ethylamino-methyl] benzo[B] thiophen (AGN 1414 is the hydrochloride)
Norgestrel	13 $\beta$ -Ethyl-17-hydroxy-18, 19-dinor-17 $\alpha$ pregn-4-en-20-yn-3-one (Wy-3707)
Pipamperone	1-[3-(4-Fluorobenzoyl) propyl]-4-piperidinopiperidine 4-carboxamide
Pristinamycin	An antibiotic produced by <i>Streptomyces pristina spiralis</i>
Proclonol	$\alpha\alpha$ -Di-(4-chlorophenyl)cyclopropylmethanol
Pyrrithione zinc	Zinc bis(pyrindine-2-thiol 1-oxide) Zinc Omadine
Rufocromomycin	An antibiotic produced by <i>Streptomyces rufochromogenus</i> (5278 RP)
Spiperone	8-[3-(4-Fluorobenzoyl) propyl]-1-phenyl-1,3,8-triazaspiro[4,5]decan-4-one
Troxerutin	7,3',4'-Tri-[O-(2-hydroxyethyl)] rutin (Present in Paroven)
Xylamidinetosylate	N-2-(3-Methoxyphenoxy)propyl-m-tolyl-acetamidine p-toluenesulphonate (BW 545C64)

## Dangerous Drugs

### AUTHORITIES RESTORED TO DOCTOR

THE Home Office announce that the authorities to possess, supply and prescribe Dangerous Drugs have been restored to Dr. Peter Louis Milbourne Hartley. The authorities were withdrawn in 1960 when Dr. Hartley's registered address was 408 Wimbledon Park Road, London, S.W.19.

[The list in the *Chemist and Druggist Diary & Year-book*, 1966, p. 254, should be amended—Editor.]

## Agricultural Chemicals

### MORE APPROVED PRODUCTS

THE Agricultural Departments of the United Kingdom announce that the following product in the 'miscellaneous' group has been approved under the Agricultural Chemicals Approved Scheme:—

METHAM-SODIUM LIQUID FORMULATIONS Campbell's Metham Sodium.

## IRISH BREVITIES

### THE NORTH

THE Ulster Chemists' Association is holding its annual meeting in the hall of the Pharmaceutical Society of Northern Ireland, 73 University Street, Belfast, 7, at 7.45 p.m. on November 23.



## NEWS IN BRIEF

A SECOND impression of "Introducing Computers" has been published (H. M. Stationery Office, price 7s. 6d.).

THE works of Evans Medical, Ltd. (a member of the Glaxo group of companies) at Speke, Liverpool, are being visited by H.R.H. Princess Margaret on October 28.

To help managers and safety officers the British Safety Council, 163 Praed Street, London, W.2, has published a Safety Code for the Use of Electricity in Industry (price 3s. 6d.).

EIGHTH title in the series Monographs for Teachers "Industrial Chemistry—Organic" has been published (price 6s.) by the Royal Institute of Chemistry, 30 Russell Square, London, W.C.1.

THE South African Mint and Coinage Further Amendment Bill provides for the name of the one-ounce gold coin to be changed from Trojan to Krugerrand. A schedule to the Bill also does away with the 2½ cent coin or tickey, as it was generally known).

A GRANT of £5,000 from the Wellcome Trust is providing some of the equipment needed for a study of the effect of an extract of cobra venom on certain kinds of cancer cell. The study is being carried out at the Indian Cancer Research Centre, Tata Memorial Hospital, Bombay.

THE Customs and Excise Commissioners have published conditions to be observed when goods are removed from warehouse without payment of duty for exportation under sections 47, 48 and 89 of the Customs & Excise Act, 1952 (notice no. 201). A notice (no. 209) has also been issued on relief of customs duty on equipment on hire or loan temporarily imported from abroad.

THE names of five colleges offering courses leading to a degree in Pharmacy (B.Sc.) of the Council for National Awards are included in the Council's September, 1966, list of courses. Honours and ordinary degree courses are offered at Brighton, Lancaster and Portsmouth Colleges of Technology and at Sunderland Technical College; an ordinary degree course is available at Liverpool College of Technology.

## SPORT

**SOUTH LONDON AND SURREY PHARMACISTS' GOLF SOCIETY.** A meeting of the Society was held at Addington golf club on October 9 when a Stableford competition was played for the Cupal prize. Results: 1, M. Lewis, Birley Park (9), 35 points; 2, S. G. Mote, Catherhead (10), 33 points; 3, R. Hedges, Birley Park (5), 31 points. *Scratch to Four Handicap prize*, J. Widoeks, Croham Hurst (14), 30 points. *Fifteen and Over Handicap prize*, K. Barke, Cuddington (22), 29 points. *Best Score on First Nine Holes*, A. Barry, Croham Hurst, 16 points. *Best Score on Last Nine Holes*, G. Howell, Banstead, 18 points. *Special prize*, G. Watt, Croham Hurst (15), 27 points.

## LOCAL OFFICERS

## PHARMACEUTICAL SOCIETY

**Fees-side.**—Secretary, T. Gould, 520a Thornaby Road, Thornaby-on-Tees, Stockton-on-Tees, co. Durham, (Change of Address).

## TOPICAL REFLECTIONS

By Xrayser

*Further Restriction*

I made my bow in pharmacy soon after legislation was passed for the purpose of putting cocaine out of reach of those who were abusing it, and I can recall the dismay with which the news was received that morphine, diamorphine and Indian hemp were to be the subject of similar restriction in, I think, 1920. My elders of the period appeared to be of the opinion that the pharmacist could not possibly cope with the increased work load suddenly thrust on him. No one, I was given to understand, could hope to keep such complicated records. The whole thing was quite impossible. If they could return from the Elysian fields — being pharmacists, where other could they possibly be? — if they could return? I say, I wonder how they would react to the mass of legal barbed wire by which we are encompassed today? It has been imposed gradually, if not imperceptibly, in a somewhat curious fashion, resembling at times the efforts of a householder attempting to plug the leaks in a worn out cistern. No sooner is one leak stopped than a trickle rapidly growing to a flood takes place elsewhere. But while appearing to be strange, the methods adopted to deal with the poisons situation have been understandable, in that modern science has produced a mass of hitherto unknown substances whose ultimate effects must have surprised those who assisted at their birth. The time for a new approach to the problem had clearly arrived, and it must be supposed that the new medicines legislation, when it comes, will be so framed as to obviate the need for a frenzied and haphazard plugging of holes. Meantime it appears all solid forms of ephedrine are soon to be controlled, and that news will not surprise the alert pharmacist who is keenly observant in his dealings with some members of the public. I had not expected to see the alkaloids of colchium included in the Fourth Schedule, since the only demand I have experienced has been on prescription. I rejoice that I may still sell, without a qualm, liquorice stick, senna pods, mustard seed, and vanilla pods. But the field narrows.

*Shortages*

On reflection, I wonder if I am quite justified in my claim to rejoice. There is no legal restraint in the sale of the items mentioned, and until fairly recently there was no problem of any kind. I had regular calls from several firms billing themselves as wholesale and manufacturing chemists, and there was scarcely an item in the drug and galenical field which could not be supplied on demand, and the firms in question appeared to be more than happy to meet any request. But where would one now buy a small quantity of vanilla pods? Or oil of bergamot? Or oil of rosemary? Or benzoin gum? The sale of such may not be highly profitable or very frequent, but for countless years the pharmacist has stocked them and the public has never thought of asking for them elsewhere. With no stretch of the imagination they are "traditional". Yet I am informed by several wholesale chemists that there is no demand for them now. I deplore that attitude, for there is a demand which stimulates my attempt to replace sold stock. But if a lady, like the famous one of Gilbert's, "who dyes a chemical yellow or stains her grey hair puce" wants to try variations on an original theme, the wholesale chemists can produce at a moment's notice a different shade for every day of the year. I have raised this point before, and I make it again with more emphasis — we are not getting a service.

*Clearing House*

Like Mr. Lamb, who addressed an area meeting of the N.P.U. and the Scottish Pharmaceutical Federation recently at Aberdeen (p. 344). I make use of a clearing house scheme — in my case that of the N.P.U. — in paying my accounts. It is time saving and money saving, as the speaker pointed out, but it is not possible to get the maximum benefit owing to the late arrival of monthly statements. Less than half were in my hands last month in time for payment by the appointed day.



## ORDERING HOSPITAL SUPPLIES

### Guild's view on rôle of pharmacist rejected

CLAIMS that hospital pharmacists should themselves make contracts and purchasing arrangements are rejected in the report of the Committee on Hospital Supplies Organisation which has been sent by the Ministry of Health to Regional Hospital Boards and hospital management committees. The Committee (under the chairmanship of Mr. J. F. Hunt) says that while it is aware that some specialists claim that they have the technical knowledge needed to choose the best articles to use and to ensure that the quality of goods received is satisfactory, it believes that such claims are based on some misunderstanding. "In our view successful purchasing demands not only technical knowledge of the commodity being bought, but also skill and experience in the techniques of contracting and purchasing." The Committee considers that the part of the user in the purchasing function is to provide for the supplies officer expert advice about suitable specification, sources of supply, quality control, etc. It does not attempt to lay down precise rules on the level at which contracts should be placed but believes that the central authority should deal directly with certain cases, including where quality control is a predominant aspect, e.g. purchase of a drug from abroad. The Report summarises the evidence it received from the Guild of Public Pharmacists which contended that it is impossible to divorce responsibility for the purchase of pharmaceutical supplies from other aspects of hospital pharmacy.

Although the committee did not accept that contention, it expresses interest in the suggestion made by chief pharmacists of two large hospital groups (who wrote independently of the Guild) that manufacture of many items in hospital pharmacies is not only economic, but also adds to the interest of hospital pharmacy. The Committee felt that the economic and other advantages claimed for manufacture in hospitals in both the pharmaceutical and the appliance fields merited further study.

The report's main conclusions centre round the belief that rationalisation of hospital supplies and equipment can lead to efficiency and economy. The Committee says that technical purchasing and contracting functions should be performed by specialist officers but recommends that there should be a strong central authority to deal with specifications, quality control, etc., and to enter into contracts where that is financially or otherwise advantageous. Below that would be the area supply unit serving a number of hospital groups. Much of the day-to-day supply work of the groups would remain but there would be no need for a designated supplies officer.

A circular distributed with the report by the Ministry of Health welcomes its recommendations in general but invites Regional Hospital Boards to submit the comments of their H.M.C.'s by November 15. The Minister has decided to make a start on the Com-

mittee's recommendation for the establishment of a hospital service branch within the Ministry's present Supply Division. The Committee had proposed that step as an interim measure towards the setting up of a hospital service supply board, but the Minister promises to review the situation in the

## GOVERNMENT CHEMIST

### Report on work of the laboratory in 1965

THE number of Customs and Excise samples submitted under the Dangerous Drugs Act fell sharply in 1965, according to the Government Chemist's report for the year (H. M. Stationery Office, price 15s.). Opium and morphine derivatives continued at their former low level, but only two seizures proved the presence of *Cannabis sativa* (Indian hemp) — a marked reduction on previous years, "though it would perhaps be premature to attribute this to the increased stringency of provisions against the cannabis traffic introduced in the Dangerous Drugs Act, 1964." Of the drugs controlled by the Drugs (Prevention of Misuse) Act, 1964, the largest number came under the heading "beta-aminopropyl benzene and its side-chain derivatives" (which includes most drugs of the amphetamine type). As a preliminary sorting test of the applicability of that generalised heading, the ultra-violet spectrum of the monosubstituted benzene ring, supplemented by the infra-red spectrum, was found most useful. In identifying individual tablets, however, infra-red spectrometry was frequently interfered with by excipients, and the Government chemist believes that the form and marking of the tablet itself may be the quickest guide; the laboratory has therefore set up a museum of branded tablets of drugs controlled under the Act.

A possible source of error when assaying old and decomposed samples of formulations for acetylsalicylic acid by the B.P.C., 1963, method is referred

light of experience with a hospital service branch. The circular comments that the Committee's views on the rôle of the hospital pharmacist should be read in the light of the proposals concerning the disappearance of group supplies officers. It reminds hospital authorities that the functions and responsibilities of the pharmacist under present arrangements were recently clarified (see *C. & D.*, May 28, p. 519).

to. The assay is based on the hydrolysis of acetylsalicylic acid and the subsequent simultaneous titration of both acetic and salicylic acids with sodium hydroxide. One sample of aspirin and Dover's powder compound tablets received smelled of acetic acid, indicating that some hydrolysis had already occurred, but assay of the salicylic acid independently showed that the loss of acetic acid had been small, though the tablets contained a fatty acid derivative and it has been shown that, in certain conditions, loss of acetic acid from such tablets can be substantial. Where old samples are assayed by the B.P.C. 1963, method an apparent deficiency may be observed, says the report, in extreme cases.

Work on the determination of iodine in drug samples and in food has shown that iodine can be lost during ashing at elevated temperatures, even in the presence of considerable quantities of sodium carbonate.

The determination of denaturants in preparations made from industrial methylated spirits is posing new problems as the preparations become more complex. Thus, although there was a decrease in the number of samples containing only perfume oils, denaturants and spirit, there was an increase in those containing surfactants, bactericides, preservatives and fixatives. The analysis for denaturants in a complex formulation often had to be treated as an *ad hoc* problem. Attempts are being made to reduce all examinations to rapid routine.

## FORTY-TWO YEARS LECTURER

### Liverpool presentation to Mr. W. E. Coates

MEMBERS of the Liverpool School of Pharmacy Old Students' Association and the School of Pharmacy, Liverpool Regional College of Technology gathered together on September 28 to pay tribute to Mr. W. E. Coates, lecturer at the school who has retired after forty-two years' service. A presentation dinner was held for Mr. Coates at the Exchange Hotel, Liverpool, and the 108 people present included old students from as far afield as London, Isle of Man and North Wales.

MR. T. L. BOWYER, head of the School of Pharmacy, who presided, recalled that when he first attended the School of Pharmacy, of which Mr. H. Humphreys Jones was then the proprietor, Mr. Coates was lecturer in chemistry and botany. He thanked Mr. Coates for the years of service he had given, and added: "I think your greatest pleasure will be in the know-

ledge of the esteem in which you are held by so many of the past students and the contribution you have made to their careers."

Later, Mr. Bowyer presented Mr. Coates with a cheque for £100 and a silver cigarette case from old students and the staff of the school.

MR. H. HUMPHREYS JONES — commented that Mr. Coates was an apprentice when he first went to the school. In 1924 he joined the teaching staff.

MR. COATES, responding, said he would not "have swapped my job for any other." During the forty-two years he had made many friends throughout the country. The staff at the school were "a great team." For some years after the School of Pharmacy had been taken over by the local authority, it had been the department of pharmacy but had now reverted to its former title.



# Ulster Chemists' Association

## SIXTH ANNUAL CONFERENCE

IN the course of organising five previous annual conferences the Ulster Chemists' Association has arrived at a special and successful formula. It demonstrated its characteristic flavour to the full at the sixth conference held at Portrush, co. Antrim, October 7-9. Newcomers to the Portrush week-ends quickly acquire the taste and resolve to come again. The number who came for the whole week-end this year was well up on 1965, though there may not have been quite so many arriving on Sunday for the afternoon business session.

Ingredients in the U.C.A. recipe are a strongly personal welcome to every member who attends, carefully selected speakers at the business sessions, but above all a blend of entertainment, social and sporting events that keep everybody occupied till the early hours of Saturday and Sunday mornings. MR. J. K. MCGREGOR as president of the Association, welcomed members at 8 p.m. on October 7. Dinner followed, to be succeeded by an entertainment in which music and songs by a professional group and songs and monologues from the talented amateurs were numerous available to the organisers was emulsified into a quick-fire floor show by the wit and showmanship of the Association's resident M.C., Harry Boyd. Among the amateur artistes MR. J. McCLENAHAN, an exile on temporary return, triply distinguished himself as composer, lyric writer and executant.

But that was not the end of the evening. At midnight there was a general exodus to the hotel's swimming pool, where everybody freshened up for half an hour — some, however, merely by watching. Even then there followed a "president's supper" in the lounge.

### Civic Reception

Saturday brought a mid-day civic reception by the chairman of Portrush urban council (Mr. W. R. Knox, C.B.E., M.M., J.P.) who incidentally is the father of a pharmacist, and in the afternoon a novelty motorcade to Portballintrae, by hairpin descents to the tiny harbour of Ballintoy, and thence to tea at Ballycastle. In that sporting event the Editor had the joy of receiving a prize for being a passenger in the winning car owner-driver Mr. Richard Holden, M.P.S.N.I., Belfast — his only personal contribution a dart-throw that scored 55.

There was a conference ball on Saturday evening in the hotel's elegant tapestry-panelled ballroom, M.C'd by Mr. N. A. J. Anderson and with many spot prizes. Swimming and refreshments again followed.

Sunday's social event was the farewell dinner, at which the president singled out for mention the Association's guests (the business-session speakers; a contingent of six from the National Pharmaceutical Union, London — the chairman, Mr. E. A. Brocklehurst and secretary, Mr. J.

Wright among them — and the Press) and for special thanks those officers and members of the Association who had been most active in engineering the success of the conference.

A feature of the week-end was the number of children and young people present with their parents. They showed obvious enjoyment at the entertainment, considerable prowess in the swimming bath and a confident proficiency in putting the motorcade contestants through their tests.

However, the fun and games of the week-ends were incidental to the main purpose: the business sessions on Saturday morning and Sunday afternoon.

### Restrictive Practices Act in Eire

In the Saturday morning session MR. BRENDAN R. SMITH (secretary, Irish Drug Association) presented a paper on the Restrictive Trade Practices Act (Eire), 1953. In outline he said:—

A LITTLE over twenty years ago war ended in Europe, leaving many muddled situations. Throughout the world the majority of countries found themselves in enonomic chaos. American taxpayers generously came to the rescue with Marshall Aid, and countries were graded for entitlement to receive it in accordance with their economic status or development. Disbursement of the available funds was in the care of the recipient countries, some of the help and money involved could be mishandled if not most carefully scrutinised. Among the countries that received Marshall Aid and — what was considered by the donors to be the best thing of all — technical advice and administrative "know-how" was Eire. In Eire no legal changes to improve or bring pharmaceutical legislation up to date had taken place since the 19th century. Because pharmacists themselves thought that some measure of control was necessary in the distribution of many medicines, and because legislation was not providing it, retail chemists took it upon themselves before the war to exercise control over manufacturers, wholesalers and retail chemists to prevent a "free-for-all" in the distribution of medicines. Pharmacists in the twenty-six counties considered it to be most undesirable for the public to have free and easy access to the purchase in any shop of so many medicines and pharmaceutical preparations which had no scheduled restriction. Arrangements were made with manufacturers whereby such preparations should be distributed through retail chemists only. Manufacturers who agreed with that policy were listed as "approved manufacturers", and "approved wholesalers" were also listed to implement the policy. The Irish Drug Association's "approved lists" were established in 1934. During the war years the approved lists policy of the Association was more or less dormant but when hostilities concluded the Association re-adopted its pre-war

policy. That was viewed with a certain amount of horror by the Marshall Aid observers, who claimed to be accustomed to free trade. Some whispering in Government quarters, and "unfair" and "restrictive" trade practices became words that were bandied about. The Eire Government sent civil servants to visit America and elsewhere to bring themselves up to date on other legislation regarding monopolies, trusts and cartels. As a result, a Restrictive Trade Practices Act was passed in 1953 to investigate and legislate against unfair trade practices of any description in Eire. Unfair trade practices were described as "any measure, rule, agreement or act whether put into effect or intended to be put into effect by a person alone or in combination or agreement, express or implied, with others or through a merger, trust, cartel, monopoly or other means or device whatsoever which . . . followed by nine clauses the last of which was "in any other respect operate against the public interest or are not in accordance with the principles of social justice."

### Fair Trade Commission

Under the Act a Fair Trade Commission was established, which on its own initiative or otherwise could investigate conditions regarding supply or distribution of goods.

The Irish Drug Association and its approved list policy came under the attention of the Commission. An announcement was made in accordance with the Act that an inquiry would be held into the supply and distribution of medicines, baby foods, toilet preparations, etc. The circulation of a price list and price changes, the coding of prescriptions, and restricted distribution by arrangement with manufacturers were spot-lighted. The inquiry went on for twenty-four days, involving the Association in high expenses. A request by the Association for prescriptions to be exempt was refused. The Pharmaceutical Society of Ireland immediately claimed through a High Court application that prescriptions were outside the scope of the inquiry as the compounding and dispensing of prescription was a professional matter. The result of the intervention was a High Court case which went against the contention of the Society, as did (by a 3:2 majority) an appeal to the Supreme Court. As a result pharmaceutical chemists in Eire legally have not professional status in retail pharmacy. In all fairness the Fair Trade Commission, having won that decision, dealt with prescriptions only from the coding aspect, suggesting that coding should be made illegal. Otherwise prescriptions were almost left alone. The whole inquiry was recorded in a sixty-page report dealing with (a) the confining of lines or approved lists; (b) price-fixing, prices, profit margins and the constant efforts by the Association to secure increased



profit margins; (c) resale price maintenance and in particular the maintenance of prices by the Irish Drug Association. Eventually, however, the Commissions' recommendations as to profits, confining of goods, price maintenance, coding of prescriptions and registered agencies for cosmetics, etc., were all turned down by the Minister, who held that it was not in the public interest to make any change. The Minister, however, did point out that any greater activity by the Association or further development of the Association's work upon those matters would have to be reviewed and could not be allowed to develop. So the approved lists were no longer published. On several subsequent occasions activities of Association have been the subject of Parliamentary questions. Grocery interests, etc., were constantly urging the Government to interfere in established pharmaceutical trade practices.

"I personally," said Mr. Smith, "still contend that pharmacy is an evolved profession which originally could not support the pharmacist by the compounding and dispensing prescriptions alone. To feed and support himself the pharmacist must deal in goods complementary to his pharmaceutical training . . . I don't think the pharmacist is any the worse for selling cameras, cosmetics, etc."

#### Questions

MR. J. A. BROWN, Belfast, asked what effect the Act had had on the day-to-day working of a pharmacy. An adverse effect, said Mr. Smith, since many products previously on the approved list were now on general distribution. There was still a need and value in the Association, he told Mr. W. H. BOYD, Belfast, but much more emphasis was made on the local associations. To Mr. J. WRIGHT, London, he said that the Commission recognised that there was still a need for the Association to give information about prices. MR. WRIGHT held that in Britain the National Pharmaceutical Union had become convinced that the negative approach of restriction had no future. The more positive approach of brightening up premises, training staff and providing a range of good-quality products at reasonable margins was being pursued. MR. BRENDAN SMITH said that the I.D.A. was also taking a positive attitude, promoting better merchandising and the formation of buying groups.

The sponsoring of products by the N.P.U. in England, said MR. E. A. BROCKLEHURST, had made manufacturers court the chemist's goodwill. He asked whether that had been the experience in Ireland. Some "deviators", replied MR. SMITH, had come back.

MR. J. A. BROWN thought many chemists were not exploiting their own products as they might. He had made special promotions of his own and been surprised at the response, but MR. BOYD thought more was to be hoped for from the product stocked by all chemists.

A vote of thanks to the speaker, proposed by MR. W. J. MOFFETT and seconded by MR. J. MORLEY THOMPSON concluded the session.

## LEGAL REPORTS

### Patent Upheld

THE validity of 'Safety-Seal' patent for electric blankets held by Dreamland Electrical Appliances, Ltd., Shipyard Estate, Hythe, Hants, has been established as a result of recent proceedings for its revocation brought against the company by an Italian, Antonio Negromanti. The Comptroller of Patents dismissed the application with costs.

### Compulsory winding up

AN order for the compulsory winding-up of Continental Cosmetics, Ltd., whose registered office is at 95 Blackfriars Road, London, S.E., was made by Mr. Justice Plowman in the High Court, London on October 10, on the petition of A/S W. Jordan Borste & Penselfabrik, of Oslo, creditors for £21,500. Mr. Charles Drake, for the petitioners, said he also appeared for two supporting creditors with debts of £1,749 and £3,982. The petition was also supported by the Customs and Excise, creditors for £3,424. Continental Cosmetics, Ltd. was not represented.

### Stole from Pharmacy

BORSTAL sentences were imposed at Leicester quarter sessions on William Lowe, of no fixed address, and John James Griffin, Gresham Street, Leicester, when they appeared for sentence after pleading guilty at Leicester magistrates' court to being jointly concerned in breaking and entering the pharmacy of Mr. R. W. Collison at 83 Berners Street, Leicester, and stealing drugs worth £9 4s. 11d. A third man, Anthony David Munt, stated to be in lodgings in Abingdon Road, Leicester, concerned in the same raid, was put on probation for three years on condition that for the next year he lived with his parents in Bedfordshire. He was alleged to have kept watch in a car while the other two defendants, who both admitted taking drugs, raided the shop.

### Failed to Keep Records

FINES totalling £65 were imposed by Chichester magistrates court (on October 4) on Philip George Tyler, M.P.S., 149 High Street, Selsey, Sussex, for offences relating to Dangerous Drugs records. The defendant had pleaded guilty to two cases of failing to make entries in the Dangerous Drugs register; not entering true particulars in the register; and not marking on prescriptions for Dangerous Drugs the dates on which they were dispensed. A police inspector said that the chemist's attention had been drawn to the matter on three occasions, once by letter from the Chichester division police superintendent. For the defendant it was said that there was no question of drugs passing improperly from his hands. As a result of checking it was found his stock of drugs was what it should be. Mr. Tyler was busy at the height of the summer season — in August he dispensed 2,500 prescriptions. His main concern was to make sure everything was dispensed correctly.

"This has been a serious warning to him to keep his paper work up to date." Imposing the fines, the chairman addressed the defendant: "Although we appreciate the difficulties you have with regard to staff and summer rushes you had previous warnings . . . It is important that the entry of drugs in the register should be kept up to date so that when quick reference is needed it can be found."

## COMPANY NEWS

Previous year's figures in parentheses

**F. D. COPELAND & SONS, LTD.**—Mr. D. F. Cox (a sales manager of company since 1956) has been appointed to the board.

**LAPORTE INDUSTRIES, LTD.**—Mr. F. W. Robinson, a deputy chairman of the general chemicals division is resigning on December 31 to take up an appointment with Minmett Financing Co., Liechtenstein.

**DERBYSHIRE STONE GROUP.**—Arrangements have been completed for the acquisition of the whole of the issued share capital of Laboratory Thermal Equipment, Ltd., for 356,250 5s. fully paid Ordinary shares and £9,750 cash. Laboratory Thermal Equipment, Ltd., will form part of the Baird & Tatlock Division.

**WILLIAMS (HOUNSLOW), LTD.**, Hounslow, Middlesex, have appointed Mr. R. W. G. Duke Far Eastern liaison officer, to be effective from the early part of 1967. He will be based at Hong Kong and will make regular visits to all Far Eastern and Australasian markets, to assist the local agents in providing technical service and all other aspects of sales promotion.

**ETHICON, LTD.**—Mr. A. L. Stewart, C.A., has been appointed director and general manager and will assume responsibility for the day to day operation of all departments of the company. Mr. J. F. Fox (formerly general sales manager) has been appointed director responsible for home and export sales. Mr. D. A. Bowman, Ch.Eng., A.M.I.Mech.E., A.M.I.Prod.E. (formerly manager of engineering services), has been appointed to the board and will be responsible for all engineering and development activity.

**GREEFF CHEMICALS HOLDINGS, LTD.**—Trading profit for the six months ended June 30 was £73,309 against £88,837 in the same period of 1965. However, investment income (calculated as half the amount expected for the year) was higher at £139,421 (£135,250) giving a consolidated profit of £212,730 (£224,087). The directors consider that trading profit for the second half may not equal that of the last half but the consolidated profit should not be much down. An interim dividend of 4 per cent. has been declared.

**CARL ZEISS, Oberkochen, Western Germany**, is purchasing the entire equity of Degenhardt & Co., Ltd., their sole British agents, and taking over control of the company on January 1, 1967. The present directors (Messrs. G. Morgan (Chairman), A. H. Degenhardt and G. D. Powell) remain on the



board and will be joined by Mr. H. lies who will act as joint-managing director with Mr. Degenhardt. Mr. lies recently resigned as executive vice-president of Carl Zeiss, Inc., New York, to take over the new post. Carl Zeiss, forms part of the Carl Zeiss foundation.

**GLAXO GROUP, LTD.**—Trading profit for the year ended June 30 was £11,812,000 (£11,176,000) and net profit before tax £12,568,000 (£11,615,000). After deducting tax of £5,960,000 (£5,870,000), minority interest and amounts retained by subsidiaries the balance available to the holding company is £6,463,000 (£4,282,000).

Owing to the transfer of the wholesaling business to Vestric on January 1, actual sales for the two years are not comparable, but when wholesaling is excluded sales amounted to £63,600,000 (£59,300,000). Losses on net current assets due to the devaluation of the Indian rupee amount to some £700,000 and have been charged against revenue reserves. Other effects of devaluation have been taken up in the current year's trading. A final dividend of 6 per cent. is proposed making a total of 16 per cent. (same). The directors say that their decision has regard to the Government's prices and incomes policy.

## BUSINESS CHANGES

**E. R. HOLLOWAY, LTD.**, have moved their administrative offices from Welwyn Garden City to Olding's Corner, Hatfield, Herts.

**THE Lilliput Pharmacy**, Lilliput Square, Parkstone, Dorset, has been purchased from Mr. P. Osmond, M.P.S., F.S.M.C., by D. J. Shakesheff, Ltd., who will take over the business on October 17.

### Appointments

**GLAXO GROUP, LTD.**—have appointed Mr. R. G. Jones assistant secretary.

**FRENCH & SCOTT, LTD.**—Mr. C. R. Nye has been appointed representative for the N.W. and N. postal districts of London, and for Hertfordshire, Bedfordshire and Buckinghamshire.

**CYANAMID INTERNATIONAL.**—Mr. W. A. Liffers has been appointed assistant regional director for Europe. He was formerly pharmaceuticals director for the Far East and Oceania region.

**Mr. GEOFFREY SMITH, B.Sc., F.P.S.**, a member of the staff of the Pharmaceutical Society's Department of Pharmaceutical Sciences, Edinburgh, has been appointed a lecturer in the department of pharmacy, Heriot-Watt University, Edinburgh. He takes up his new appointment in January 1967.

**ARMOUR HESS CHEMICALS, LTD.**—The following appointments have been made in the chemical division:—Mr. J. L. Forryan, chemical sales manager, responsible for home and overseas sales; Mr. D. J. Clifton, research and development manager; Dr. P. Naylor, head of application research and customer service laboratory.

## PERSONALITIES

**MISS LILIAN I. ANDERSON, M.P.S.**, is the president-elect of Blackpool Chamber of Trade.

**Dr. M. HORIOKA**, director of pharmacy of Kyushu University Hospital, Japan, is in the United Kingdom visiting and studying the work of hospital pharmacies. Dr. Horioka is also to see the work of the National Poisons Information Centre at Guy's Hospital, London. He has already visited the Wellcome historical medical library, Euston Road, London, N.W.1. Kyushu University Hospital has the second largest hospital pharmacy in Japan and one of the largest in the world.

**Mr. W. E. COATES**, who retired recently after forty-two years as a lecturer at Liverpool School of Pharmacy was born in that city. Mr. Coates obtained B.Sc. honours at Liverpool University and went on to qualify A.R.I.C. He then studied at Liverpool School of Pharmacy and qualified in 1924. After a period as manager of a chemist's shop in Shipley, Yorkshire, he returned to the School of Pharmacy in October, 1924, as a lecturer and continued in that capacity when the local authority took over the school in 1950. His subjects were botany and pharmaceutical chemistry, particularly physical chemistry. (See p. 368.)

## DEATHS

**BRUMWELL.**—On October 4. Mr. Cecil Vernon Brumwell, M.P.S., 50 Saxon Road, Hove 3, Sussex. Mr. Brumwell qualified in 1920.

**Mr. S. S. Howard** (joint secretary, Brighton and Hove Association of Pharmacy) writes:—

The death of Cecil Brumwell ends a long record of faithful service in many activities. At the time of his

death he was an honorary vice-president of the Brighton and Hove Association of Pharmacy, which he had served for six years as president from 1938-44. He was a member of the Brighton 1942 Committee, a founder member and past president of the Galen Sports Club and a cricketer of considerable ability. He served for some years as a member of East Sussex County Council, to which his special contribution was an abiding interest in education. He will be remembered as a man kind and courteous, with strong convictions and character, and a deep sense of loyalty to his church, his profession and his friends. His funeral service was held on October 7 in the Methodist Church in Portland Road, Hove, to which he had given many years of devoted service. The deepest sympathy will be extended to his widow, who was his constant and loving companion in his varied professional and social interests.

**DERRICK.**—On September 22, Mr. Fred Balderson Derrick, M.P.S., 4 Stratford Road, Liverpool 19. Mr. Derrick qualified in 1920.

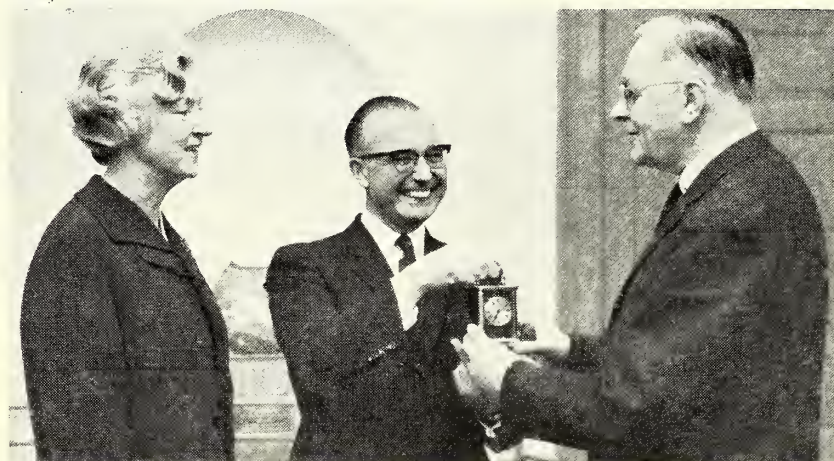
**McKELVIE.**—On September 25, Donald Clarke McKelvie, M.P.S., 8 Connaught Road, Fleet, Hants. Mr. McKelvie qualified in 1913.

**WILCOX.**—On August 4, Mr. David Wilcox, M.P.S., 4 Devonshire Place, Prestwich, Manchester, Lancs. Mr. Wilcox qualified in 1954.

**McCONAGHY.**—Suddenly in hospital on September 24, Mr. Richard McConaghy, M.P.S.N.I., 27 Blenheim Drive, Castlereagh Road, Belfast, 6, aged forty-two. Mr. McConaghy qualified in 1960, and during his career served on the staff of pharmacies in Portrush and Belfast. He was a keen sportsman and was especially well known as a playing member of the Portrush hockey club. He is survived by a widow and young daughter.

**PLUMMER.**—On September 3, Mr. Richard Kenneth Plummer, M.P.S., Rostrevor, Thirsk Road, Easingwold, Yorks. Mr. Plummer qualified in 1903 and retired from business in 1940.

**QUINN.**—Recently, Mr. Cyril Hubert Quinn, M.P.S., 11 Lowther Avenue, Blackpool, Lancs. Mr. Quinn qualified in 1913.



**TIME FOR RETIREMENT.** Mr. W. K. Fitch, (right) who retired recently from the Pharmaceutical Society's staff after 36 years' service, admires the clock which was the Council's parting gift to him. Mrs. Fitch looks on as Mr. J. C. Bloomfield makes the presentation.



## TRADE NOTES

**Distributors.**—The distributors of Cataline specialities are the Cataline Co., Ltd., Linthwaite, Huddersfield. [Corrected note.]

**Symptomatic Relief of Colds.**—Bodryl, a speciality marketed by Parke-Davis & Co., Staines Road, Hounslow, Middlesex, for the symptomatic relief of colds, is available in a tube of twelve multi-layered tablets.

**Price Unchanged.**—John H. Heron, Ltd., Hook Road Mills, Goole, Yorks, ask us to point out that the price of the double size family pack of Froment continues to be 6s. and not as shown in a recent advertisement.

**Galenicals.**—Bush Boake Allen, Ltd., Pharmaceutical Division, Wharf Road, London, N.1, advise that they have available a wide variety of galenicals and preparations prepared in accordance with official standards.

**Clinical Thermometers.**—G. H. Zeal, Ltd., Lombard Road, Morden Road, Merton, London, S.W.19, offer clinical thermometers in accordance with B.S.1961:691 all engraved with the B.S.I. Kite Mark.

**Price Reduction Credit.**—Boots Pure Drug Co., Ltd., Station Street, Nottingham, announce that they have reduced the price of Stabillin V.K. Sulpha tablets. Chemists are invited to claim credit on stocks held.

**Survey Findings.**—Bellair Cosmetics, Ltd., Boardman Street, Oldham, Lancs, draw attention to the fact that an independent national survey found that of all users of squeeze pack hair sprays, a remarkable percentage bought Bellair products.

**Shavers and Spare Parts.**—Haynor, Ltd., announce that the supply of Swift shavers, service facilities, guarantee claims and supply of spare parts is being handled by Herrmann Shaver Services, Ltd., 111 High Holborn, London, W.C.1.

**For Eye Drops.**—The new 'one trip' Beatson eye drop bottle offered by Beatson, Clark & Co., Ltd., Rotherham, Yorks, is available with standard or silicone rubber teats. Caps with Melinex faced liners are also listed. Sizes are 10-mil, 20-mil, 2-dram,  $\frac{1}{2}$  oz., 1 oz., and 2 oz.

**Problem Solvers.**—Pharmacists in retail practice are reminded that Elida, 43 Portman Square, London, W.1, who manufacture Sunsilk preparations, Sea Witch, Harmony and Melody hair colours, Pin-Up and Twink home perms, have available experts ready to solve their customers' hair care problems.

**Pharmacy and Perfumery.**—Chas. Zimmermann & Co., Ltd., Dega Works, Walmgate Road, Perivale, Middlesex, are offering the Dega range of pharmaceutical and fine chemicals and also a range of perfumery concentrates that can be blended in soaps, perfumes, cosmetics and aerosol preparations.

**Purchase Tax Changes.**—MERCK SHARP & DOHME, LTD., Hoddesdon, Herts, draw attention to the fact that their product Lyovac Edocrin is now

exempt from purchase tax. — ROCHE PRODUCTS, LTD., Welwyn Garden City, Herts, make a similar announcement in respect of Natulan capsules.—A. H. ROBINS CO., LTD., Foundry Lane, Horsham, Sussex, advise that Donnagel and Donnagel with neomycin are also exempt from purchase tax.

**Discontinued.**—Glaxo Laboratories, Ltd., Greenford, Middlesex, have discontinued the coarse particle form of Grisovin tablets which since July 1965 has been issued only against orders for Grisovin which have expressly specified "Coarse Particle." Grisovin-FP (Fine Particle) tablets continue to be available in packs of 100 and 1,000.

**Rights Acquired.**—Pigot & Smith, Ltd., Leigh Street, Wigan, Lancs., have acquired from Messrs. Dalmas, Ltd. the right to manufacture and sell the Mimospray deodorant aerosol, together with the rights in the trade name Mimospray. As the Mimospray aerosol was hitherto contract packed by Pigot & Smith there is to be no change in formula or presentation, and the present price structure will be maintained. Messrs. Dalmas are to cease distribution of Mimospray on October 31, after which date all orders should be sent to Pigot & Smith, Ltd.

### Competitions

**Prize for Plymouth Chemist.**—Winner of the first prize in the 1966 Milk of Magnesia tablets competition for chemists was Mr. William L. Harley, Plymouth, who is shown receiving his £120 cheque from Mr. Cecil Grice (sales director of the Phillips, Scott & Turner Co.) at Yelverton on September



29. Mr. Harley has been a chemist with the Plymouth Co-operative Society Ltd., for twenty-nine years. He opened the society's Jubilee pharmacy in Deverell Park Road in 1937 and has been branch manager there ever since. All told there were 101 prizewinners from chemists all over Britain.

**Watches and Champagne as Prizes.**—First fifty correct entries opened each week is a competition organised by Ever-Ready Personna, 26 Bedford Row, London, W.C.1, are going to receive a Swiss gold watch and a bottle of champagne. Every entrant, winner or not, is receiving a 30s. voucher towards the purchase of an eight-transistor radio. In each of three columns of sporting terms on football, cricket and tennis, wrong terms appear and entrants must simply place the terms in their correct places, also providing as

proof of the purchase a gold spot from a pack of Super-Personna double-edged blades. The retailer pays only for a combined 30 x 5 deal (a display unit) containing twenty-three carded blister packs of Super-Personna blades in new fast-loading "dispenser" and ten carded blister packs of Super-Personna injector blades and receives three "dispensers" of five blades free with each unit he orders.

**Cruise as Prize.**—Julia Lockwood, star of stage, screen and television, headed a panel of judges in a recent nation-wide competition organised by Thomas Christy & Co., Ltd. Aldershot, Hants, to promote sales of Christy's skin emulsion. Competitors were asked to select and put in order a number of situations in which the skin emulsion would be most beneficial, and to complete a sentence on why they liked



the product. All entries had to be accompanied by a leaflet from a pack of Christy's skin emulsion. Principal prize was a luxury cruise for four people on the S.S. "Orcades" to Madeira, Tenerife and the Azores. There was also a cash prize of £150, and £100 runners-up each received a Kodak Instamatic-100 camera. First prize-winner was Mrs. Irne Salinieks of Hove, Sussex, whose family were brought to London as guests of the company for an evening's entertainment.

### Bonus Offers

AGFA-GEVAERT, LTD., Great West Road, Brentford, Middlesex, 6s. bonus on each of eight Agfa rapid cameras. Till December 16.

MENLEY & JAMES LABORATORIES, Welwyn Garden City, Herts. Contac 400. Thirteen invoiced as twelve plus 5 per cent. discount on order for 6 doz. 6-capsule size plus 1 doz. 12-capsule size; fourteen invoiced as twelve plus 7½ per cent. discount on order for 10 doz. 6-capsule size plus 1 doz. 12-capsule size; fifteen invoiced as twelve plus 10 per cent. discount on order for 20 doz. 6-capsule size plus 4 doz. 12-capsule size. In any parcel 2 doz. of the 6-capsule size may be substituted for 1 doz. of the 12-capsule size or vice versa. [Corrected note.]

### INFORMATION WANTED

The Editor would appreciate information about:

- Dr. Gibaut surgical belts (present supplier) Indibalm.
- IXenno! slimming soap.



## NEW PRODUCTS AND PACKS

### PHARMACEUTICAL SPECIALITIES

**Aerosol Against Bronchospasm.**— Moore Medicinal Products, Ltd., Aberley House, Aberdeen, Scotland, have extended their range of pressurised units for the treatment of bronchospasm to include a new speciality Isovon (plain isoprenaline) spray in PIB unit. Isovon contains a 35 per cent. w/v solution of the hydrochloride and delivers approximately 330 metered doses, each of 0.18 gm.

**Formula Modified.**— Armour Pharmaceutical Co., Ltd., Hampden Park, Eastbourne, Sussex, announce that when existing stocks are exhausted a modified Syrtussar formulation will be supplied against all orders. The new formulation excludes the antihistamine content pheniramine maleate 1.5-mgm. per mil. The product name, packs and prices remain unchanged. The company state there will be no necessity for the return of existing stocks to Eastbourne, since all prescriptions for Syrtussar should be filled from such stocks until the new formula is released.

**Two Diverse Products.**—Pfizer, Ltd., Ramsgate Road, Sandwich, Kent, have issued two new products. Equipose is an anti-anxiety preparation offered in capsule form each of which contains hydroxyzine pamoate 100-mgm. Equipose has been shown to produce a calming effect in anxious and tense psychoneurotic patients without disturbance of mental faculties and without loss of mental acuity. The adult dosage varies with individual requirements and ranges from 100-mgm. daily to 400-mgm. daily in divided doses. Equipose is controlled by Schedule 4B of the Poison Rules. Pack is a bottle of 50. Ultrapen syrup 125, an oral penicillin preparation for the treatment of Gram-positive infections, is a sweetened, passion fruit flavoured preparation containing 125-mgm. propicillin potassium salt per 5-mil. The pack is a large capacity bottle that facilitates the easy addition of 36-mil. of distilled water to the dry powder to produce a final volume of 60-mil. yielding the appropriate concentration per dose.

### OVER-THE-COUNTER MEDICINALS

**Vitamin Tonic.**—Rexall Drug Co., 9 Castle Boulevard, Nottingham, have launched Plenamins vitamin tonic having "an effective formula and a pleasant taste". Its composition is ferrous gluconate B.P. 3.00 per cent., aneurine hydrochloride B.P. 0.01 per cent., caffeine (anhydrous) B.P. 0.25 per cent. The pack is an 8 oz. bottle in a white carton with blue and red design.

The company offer a display unit and consumer tasting samples on orders of 1 doz. or more.

**A Replacement.**—United Chemists Association, Ltd., Ucal Works, Cheltenham, have discontinued the manufacture of glycerin and borax and borax and honey. They are replaced by Modicare which is a preparation containing 0.02 per cent. w/v domiphen bromide in glycerin. Modicare is claimed to have antiseptic and antifungal properties and be suitable for infections of the mouth and gums including those caused by fungi in babies and children. It is also said to be effective for ulcers in the mouth and other oral infections in adults. Modicare is marketed in 1 oz. bottles.

### COSMETICS AND TOILETRIES

**Now in Sachets and Bottles.**—Fisons Pharmaceuticals, Ltd., Loughborough, Leics, are now offering Vitapointe lemon shampoo in sachets and bottles.

**Two New Products in Range.**—Sophistique, Ltd., Battersea Road, Mersey Industrial Estate, Heaton Mersey, Stockport, Ches, have added to their Mister Smith's range of gents' toilet preparations an after-shave foam and a deodorant.

**Pearlescent Skin Softener.**—Latest product from Revlon International Corporation, 86 Brook Street, London, W.1, is Silk of Intimate—"the full length fragrance." Silk of Intimate is claimed to dress the body from head to toe in "an invisible gossamer sheer silk" that softens the skin and gives a wrap of "lingering exotic fragrance." The product carries a light, luxurious version of the classic Intimate scent, blended with skin softener into an amber lotion. The pack is a glass bottle.

**Redesigned Packages.**—J. Floris, Ltd., 89 Jermyn Street, London, W.1, are issuing their bath essences in the newly-designed packs illustrated. The bottle fits into a gold backed box cov-



ered in pale blue and gold and the gold stopper is claimed to make the bottle perfect for travel, the shape to be ideal for standing on the bathroom shelf. The products are available in 14-c.c., 34-c.c., and 84-c.c. sizes.

**Moisturising Face Mask.**—Dorothy Gray, Ltd., Marshall Road, Hampden Park, Eastbourne, have produced a new Secret of the Sea moisturising face mask claimed to give women a "wonderful opportunity" of stimulating, refreshing and refining the skin texture. The mask is a non-drying creamy pre-

paration containing the same formulation as Secret of the Sea cream. It is a firming treatment especially for dry skins and a tonic for dry and "sun-hangover" sallow skins. To launch it the makers are reintroducing a special ½-oz. trial size of Secret of the Sea cream to give potential new users a chance of purchasing a trial size and regular users the advantage of a small size in light plastic container for use during travel.

**Eye Cream.**—Revlon International Corporation, 86 Brook Street, London, W.1, are marketing a new product, Eterna 27 eye cream, described as a special blend of modified oils and refined emollients. The product is a translucent, velvety, water-holding cream that is understood to leave a light, emollient film around the delicate area of the eyes, retarding moisture loss from the underlying tissues. The unique ingredient of Eterna 27 is understood to be Progenitin (pregnalone acetate), an ingredient that has given evidence, it is stated, of being able to reduce the signs of ageing skin. A companion product is Eterna 27 throat cream.

### SUNDRIES

**Instant Hair Set.**—L. G. Hawkins & Co., Ltd., Drury Lane, Hastings, Sussex, draw attention to their new Hawkins instant hair set. The hair is simply put into rollers and pre-warmed heaters slipped in.

**Features of a New Flask.**—The new Aladdin Dura-clad vacuum flasks of Aladdin Industries, Ltd., Greenford, Middlesex, is claimed "the finest flask ever made." Cased in polypropylene, with jacket, collar and handle moulded in one piece for strength—it is finished in charcoal grey and red. The flask is available in 16-oz. and 32-oz. sizes. It has an insulated leak-proof stopper giving drip-free pouring from any angle, and a rubber-cushioned shock absorber.

**Disposable Nappy.**—A new type of disposable nappy, which has already captured over 90 per cent. of the Swedish market and well over half of most European markets in the past 18 months, is now being manufactured under licence and marketed in the United Kingdom by Lewis Woolf Griptight, Ltd., Birmingham. Branded Sof'Down, the Swedish-style nappies are filled with a specially combed fluff made from wood pulp. The filling has exceptional capillary attraction, an extremely high moisture holding capacity and furthermore retains its shape and does not come apart when wet. They are covered with Softelle, a new non-woven material which is both smooth and soft but also firm and white. A distinctive feature of Sof'Down is its neatness. The non-woven cover has firmly sealed ends and softly rounded seamless edges which do not chafe.

The brand symbol is a fluffy white duckling. Two sizes are available one for babies up to about six months, the other standard. Each pack holds twenty.



# North-eastern Pharmacists' Conference

## LAST MINUTE ADDITION TO AGENDA

MEMBERS of the Pharmaceutical Society's four North-eastern Branches (Sunderland, Tees-side, Northumbrian and Durham County) met in Durham for their annual conference on September 28 expecting to discuss only the subjects of Advertising and Distribution of Pharmacies. However, the shock announcement of the previous evening about the reduction in chemists' remuneration (see *C. & D.*, October 1, p. 315) moved the chairman to include "Remuneration" as a third subject.

Principal speakers were Mr. C. C. STEVENS (a member of Council), and Mr. J. REED (a member of the National Pharmaceutical Union Executive). Mr. Reed had taken the place, at short notice, of Mr. W. T. Rees (chairman, N.P.U.) whose sudden illness prevented his attendance.

Theme behind the subjects was "Thinking Aloud" a title chosen to encourage the speakers to be outspoken. That was reportedly achieved, both speakers quickly making it clear that opinions they expressed were unrelated to their official capacity. Neither hesitated at times to make it clear that the audience, as individuals, were as much responsible for the unsatisfactory state of affairs as any of the official bodies they were holding accountable.

### Limitation of Pharmacies

MR. STEVENS opened the discussion by making it quiet clear that to him "controlled distribution of pharmacies" meant only one thing—"limitation." He had no doubt that in the long term it would be an economic success, but in the short term would cause much hardship in pharmacy. In order to survive a pharmacist must have a monopoly of professional work, which meant that many people with medium or even good businesses who had invested their life savings, and life work, in their businesses would be unable to sell when they came to retire, particularly if their business was largely non-professional.

Young graduates would find that legal limitation would make his chances of opening a new pharmacy very poor. In Scandinavia most pharmacists reached the age of 50-60 before owning a pharmacy! The members of the Society would decide on limitation but it was important they should know exactly what they were talking about.

Mr. Stevens thought that location of pharmacies should be controlled by a government body on which the Pharmaceutical Society was adequately represented. That was a policy already followed in the case of doctors. If the Society were to be asked to accept control it was likely to cause dissention among members, particularly as there was the additional complication that many pharmacies were run on unethical commercial lines, as opposed to those engaged principally in N.H.S. dispensing.

MR. REED in his address immediately proclaimed the theme behind

most of his remarks. It was, he said, essential that thinking on limitation, or anything else, should be essentially rational and not emotional. Limitation would be seen to be primarily in the public interest. It would be uneconomic for everyone in the country to be within easy reach of a pharmaceutical service, although that was an ideal for which to strive. He did not approve of Government control for one minute and was firmly opposed to any form of nationalisation. He reminded the audience that the N.P.U. Executive had set up an advisory committee to discuss the problem of distribution of pharmacies.

### Economics

Mr. Reed felt that in any event economics would play an increasing part in limitation. Many present owners would be unable to sell their businesses, which would disappear on the owner's death or retirement. Amalgamation into group pharmacies was the answer, asserted Mr. Reed. It would give more leisure to the pharmacist and a more efficient and comprehensive service to the public. Government control would mean the compulsory closing of many pharmacies, it was therefore essential that the majority view of Pharmaceutical Society members decide the issue.

MR. J. KNIBB (Durham) asked what would be the structure of a Government commission on limitation. Which pharmacists would be members? MR. STEVENS replied that the committee should be fairly large, about twenty-one people, he thought. Half of the members should be pharmacists of whom one third each should be elected by the Pharmaceutical Society, the National Pharmaceutical Union (whilst they were the negotiating body for N.H.S. contracts), and from the contractors list. The remainder of the committee should consist of Members of Parliament, representatives of the General Medical Council and Consumer Group representatives from the public. The casting vote must remain with pharmacists. MR. KNIBB contended that that would allow too many other bodies to have a voice in pharmacy control but MR. STEVENS felt the fact of "planned" distribution of pharmacies was the answer to Mr. Knibb. Other professions such as opticians and dentists had maintained their own control, and had no limitation. MR. W. M. DARLING (Sunderland, and a member of Council) disagreed with Mr. Stevens that planned distribution was even more than limitation. It was well known that at the moment only the hurly burly of economics controlled the siting of pharmacies. It was imperative, if pharmacists were to provide a service in uneconomic areas, that the Government should subsidise such areas. Mr. Darling felt that amalgamation of pharmacies would go a long way to providing better working conditions and much improved service to the public. If

amalgamation were attempted by pharmacists at present another pharmacy could be opened that completely killed the advantages of the attempted group service, both economic and to the public.

MR. REED pointed out that already the contractors themselves through the Central N.H.S. (Chemist Contractors) Committee subsidised some of their colleagues. He very much wished to remain independent, and feared nationalisation. What happened, he wondered, in Scandinavia? MR. STEVENS said that the system in Scandinavia was definitely nationalised, but in France there was already some relaxation of the tight control hitherto exercised and some non-pharmaceutical capital in pharmacy businesses was being allowed.

MR. G. W. HERDMAN (Sunderland) asserted that the Pharmaceutical Society should have an absolute right to stop a new pharmacy opening in any area where it was not required. Comparison with opticians was not valid, they practised in urban areas and people travelled to them at their leisure, pharmacists were needed locally to supply the immediate need for medicines.

### New Capital

MR. T. GOULD (Tees-side) made the point that there was need for much new capital in pharmacy which could not be obtained if pharmacy was carried out under low conditions of service.

Replying to MR. KNIBB who wanted to know if limitation or group practice would encourage traditional or strictly ethical pharmacy MR. REED stressed that there must be no wishful thinking, a fully ethical pharmacy under government control would put pharmacists in line with nationalised industry. He himself had one pharmacy whose business was 80 per cent. dispensing, but he was loth to relinquish business lines. The Shops, Office & Railway Premises Act would do more to force owners to improve their premises than the N.P.U. or the Society had ever been able to achieve, he said.

MR. STEVENS said that the Society had absolutely no power to refuse registration of premises even if they were completely insanitary, "a shocking scandal" but it would need legislation to alter the position. He thought pharmacists were over-inspected. There should be one inspector only, the Pharmaceutical Society's.

The meeting moved on to discuss advertising, and MR. REED quickly declared himself fully in favour of the right to advertise, subject to restraint, even though he himself did not advertise. He made the point that the most important advertising by the pharmacist was his window displays, his fascia and stationery. He would not allow any form of television advertising of medicines. Although it had been said that professions did not advertise, it must be remembered that they were not selling goods. A phar-



macy with merely a plate outside the premises stating the name of the owner, no facia, no window display, was an impossible proposition.

MR. STEVENS pointed out that the Society had the basis of a code on advertising, but the chairman of the Ethical Committee had to build bricks without straw. He needed a resolution passed by members laying down specific enforcements. It was significant that a legal chairman of the Statutory Committee had said that an ethics code could only be enforced by a majority ruling of all members. Pending new legislation pharmacists could not do away with advertising. Both dentists and opticians had continued to advertise until they were granted a monopoly position.

The motion on advertising at the Society's annual meeting (see *C. & D.*, April 23 pp. 407 and 410., May 28 p. 541) had been generally accepted but he believed the use of the title "chemist" should be allowed.

MR. HERDMAN felt that all advertising should cease as in the original motion to the Society. Pharmacists wanted monopoly before they burnt their boats certainly, but which had priority.

MR. STEVENS replied that it was up to Mr. Herdman and his colleagues to decide whether there was to be legislation by voting for it at the annual meeting. The difficulty in the use of the word "chemist" in advertising was aggravated by the 250 companies who had the word incorporated in their title.

#### Marginal Increase

MR. REED reminded members that it had been estimated only a marginal increase would be effected if the total sales of all medicines through non-pharmaceutical sources were stopped.

Referring to Mr. Stevens' mention of the difficulty of company names with restricted titles in them, MR. DARLING said it should be a simple matter to overcome that by the use of trade names for advertising purposes. MR. REED pointed out that the N.P.U. realised the necessity for advertising its sponsored products and hoped that no projected legislation would prohibit it.

Going on to discuss the remuneration cut, the meeting found that in view of the scanty information about agreement, informed discussion was difficult. Both Mr. Stevens and Mr. Reed were however in complete accord in condemning the way the matter had been released to the Press.

MR. STEVENS said he had great difficulty in imagining any other body that would have concluded an agreement providing for such a cut. However, he could obviously not be properly informed, and he felt it was more an N.P.U. matter.

MR. REED felt once again this was a matter for rational consideration not emotional outburst. The time for complaint was when the agreement was negotiated not when it operated. Using as far as possible the meagre information at his disposal Mr. Reed made a very clear explanation of the working of the 'on-cost' calculations, which it seemed not all in the hall had studied

in the past. There was in fact, said Mr. Reed, not a cut, rather an adjustment, and members should remember that there were other reviews under way.

MR. HERDMAN moved a vote of

## SHOPS AND OFFICES IN 1965

### Annual report of Minister of Labour

THE second report of the Minister of Labour on the working of the Shops, Offices and Railway Premises Act (H.M. Stationery Office, price 4s. 6d.) covers the calendar year 1965 (the first report dealt with a period seventeen months to the end of 1964). The report states that most local and fire authorities had made a substantial effort but a number had done little or nothing to enforce the Act. However, 'only a small minority of occupiers of premises covered by the Act showed any real reluctance to comply with its provisions once they were made aware of their obligations.'

#### Registration and Inspection

By the end of December, 1965, the total number of premises registered was 689,618, an increase of 70,000 (11 per cent.) over the corresponding figure for 1964. Many occupiers apparently remained unaware of the need to register their premises. Many more registered premises were inspected during the year (244,250 against 89,802) or 35 per cent. against 15 per cent. in 1964. Visits, including inspections, totalled 566,818 (240,326 in 1964). Out of 1,647 local authorities 1,614 had submitted annual reports at the time the Ministry's report was prepared. Seventy-six of them had carried out no inspections and ninety-two had inspected 10 per cent. or less of the premises registered. While inspection programmes appeared generally reasonably satisfactory, the results in the lower ranges were disturbing, and action was being taken to follow up authorities whose percentage rate of inspection was ten or less.

#### Enforcement

Dealing with enforcement, the report states that some local authorities made comments similar to those they made in 1964. Drastic changes can hardly be expected, it comments, in so short a space of time. Reports of local authorities again showed that there were considerable variations in the standard of compliance. Larger premises generally offered staff better conditions than smaller establishments especially where those were older converted premises. Apart from contraventions leading to legal proceedings, points most often needing correction were absence of thermometers, missing or deficient first-aid requisites and failure to display abstracts of the Act.

Washing, sweeping and cleaning were found less satisfactorily done in "backroom" premises (such as stock and preparation rooms and sanitary conveniences). There was a tendency for shops to amass quantities of used packaging materials, making the premises appear more dirty than they really were.

"Most problems concerning mainten-

ance of a reasonable temperature related to shops, especially where managers considered sales promotion depended upon a constantly open door regardless of external temperature." Difficulties over ventilation also occurred most often in shops, especially older shops. Many shop owners thought that doors provided sufficient ventilation, and objected on security grounds to installing fans. 'Modern trends in shop design often neglect the need for permanent ventilation and this, together with an anxiety to prevent burglaries makes natural ventilation sometimes difficult to achieve.'

In offices and shops alike lighting standards were found good in areas open to the public, but less satisfactory elsewhere. The worst lit places in shops were storerooms, corridors, stairs, wash places and toilets, where artificial light was of low intensity, badly positioned "or occasionally absent altogether." Stacked goods often blocked out what little light was available. Floors, passages and stairs again presented a major problem for most authorities. Worn floors and passages, loose and holed floorboards and worn and torn coverings were reported and many stairs lacked handrails.

#### Accidents

Accidents reported during the year numbered 17,225 the average monthly figure reported in 1965 being 40 per cent higher than in 1964. That did not mean, says the report, that there had been a significant rise in rate. The figure of reported accidents could be expected to increase steadily in the early months of the Act's operation. Of the reported accidents 7,276 happened to men, 7,854 to women, 967 to boys and 1,128 to girls. Falls were by far the commonest cause, accounting for 40 per cent. of the total reported accidents.



ALL SET FOR SOME GOOD PHOTOS: Mr. Ken Lawley (assistant advertising manager of Ilford, Ltd.) takes cameras aboard for the Ilford photo dealers who flew recently to the United States as winners in a contest, organised by the company (see *C. & D.*, August 20, p. 165.)



# Correspondence

Letters when received must bear the name and address of the sender, not necessarily for publication. The Editor does not hold himself responsible for the views expressed.

## Payment for Prescriptions

SIR,—According to ECN 546, a payment on account equivalent to about 80 per cent., together with the balance due for the previous month, will be paid *on the first working day of each month*. Since those new arrangements came into force I have not received my EC34 (part B) before the 4th of the month. This month it was the 7th when it was received. At this rate I shall soon be receiving payment on 16th of the month as under the old scheme, but only 80 per cent. of the total.

MICHAEL S. SMITH,  
Tamworth, Staffs

## 'On Expert Advice'

SIR,—Fellow members, if you feel as you say, resign from the National Health Service as I have done. From midnight on December 31 I shall be free to practise as a professional man and not as a hired help of the Ministry. It will be most refreshing, to feel that after some thirty years trying to be a professional man, I am at last becoming one. This was done two days *before* the cut, on expensive expert advice after analysis in depth of my business. Do you know how much you don't get of 2s. 3d. fee?

ERNEST KNAPE,  
Tavistock, Devon

## Concerted Protest

SIR,—May we appeal to all pharmacists who are as indignant as we are about the recent cut in our remuneration. We are not interested in statistics, arguments or justifications, only in the principle involved and the manner in which this was applied and announced to us. If there are any such pharmacists will they communicate with us and we will then endeavour to co-ordinate all replies in order that a concerted protest may be made.

K. H. and L. M. WRIGHT,  
7 The Ridgeway, Parklands,  
Chichester, Sussex

## Any Obligation?

SIR,—Recently your contributor E. C. Tenner made some comment on the growing and insidious practice of doctors putting the mystic letters "N.P." on prescriptions. I heartily agree with him on every point bar one. I do not agree with his proposed levy of "a halfpenny per prescription." It should be *at least sixpence*, and it should definitely be paid entirely by the doctor concerned, and by nobody else. Why should it be a "charge on the Ministry?" That would mean that it was actually paid for by the taxpayer in general (which includes ourselves). Why should we, or anybody else, be expected to pay the cost of any doctor's laziness? (B.M.J. please copy!) Another thought, however, arises out of all this. When a doctor writes "N.P." on a prescription, are we pharmacists in any way morally, ethically, legally or contractually

obliged to comply? May we please have an *authoritative* answer to this question, quoting "chapter and verse?" Personally, I do not believe that we are.

JOSEPH SOAP

## Preservation of Jenner's House

SIR,—Reports recently published in the national press of Cheltenham town council's decision to demolish Jenner's house in Cheltenham must have shocked many people, other than doctors, who would like to see preserved this link with one of our greatest medical pioneers. The demolition has now been deferred for six months as a result of the action of the North American Jenner House Preservation Committee which is trying to raise funds to purchase the house and preserve it in good order for posterity. The Faculty of the History of Medicine and Pharmacy of the Society of Apothecaries of London proposes also to make an appeal to its members and others to support a fund for this purpose. We appeal to all who would like to support this cause to send their subscriptions to the Treasurer, Faculty of the History of Medicine, Society of Apothecaries, Black Friars Lane, Queen Victoria Street, London, E.C.4. Cheques should be drawn on behalf of the Jenner House Preservation Fund.

F. N. L. POYNTER,  
Wellcome Historical  
Medical Library,  
Euston Road,  
London, N.W.1

## "Round the Clock"

SIR,—Your hospital pharmacist contributor (see C. & D., October 8, p. 353) appears to be advocating that a pharmacy key should be available to the medical staff for 24 hours a day. When I was appointed to this large psychiatric hospital in 1946, all the medical officers had pharmacy keys. I lived near the hospital and I found I was called in regularly to help them with their dispensing. As the medical and pharmacy staff increased, there were sixteen people with keys who could take anything from the department at any time. I found I was unable to have adequate control over my stocks of schedule poisons, and there was no financial check on losses from the substantial stock. When I was given a new department I insisted that there should be as few keys issued as possible. We made two emergency cupboards in different parts of the hospital, the medical staff were all asked to write down what they felt they might require in emergency, and the cupboards were stocked according to those lists, the keys being kept in the matrons' offices. The system has worked very well. I am not called on duty nearly so often, and the doctors are quite satisfied with the arrangement. The keys are now in the control of the pharmacy staff, and there is a sealed one available in the

fireman's cupboard. I feel my stocks are now under very much better control.

ADA L. STORER,  
Chief Pharmacist  
Parkside Hospital,  
Macclesfield

## N.H.S. Endorsements

SIR.—MUGWUMP-158 (see C. & D., October 8, p. 350) seems to have mistaken ideas of the requirements regarding endorsements and of the Pricing Committee's part in the arrangements. The requirements regarding the endorsement and pricing of prescriptions for Proprietary Preparations are as stated in the Drug Tariff Clause 4 Part 1—

(a) The basic price for proprietary drugs or preparations including those listed in Part IV of the Tariff will be the net price charged by the manufacturer or wholesaler for the size of pack from which the prescription was dispensed as endorsed on the prescription by the chemist, unless his overall demand for the product appears to justify payment being based on the cost of a larger size, in which event, notice having been given to the chemist, the basic price will be the price of that larger size.

(b) Where the chemist has failed to endorse an occasional prescription, the basic price for any preparation included in Part IV of the Tariff will be the cost of the corresponding pack in that list or other appropriate pack, and for other preparations it will be the cost of an appropriate pack.

The Joint Pricing Committee for England is required to operate these terms and those in E.C.N. 441 which were agreed by the N.H.S. (Chemist Contractors) Committee and the Ministry of Health. It will be seen that chemists are not required to claim other than which they dispensed.

ERIC E. STABLE.

Clerk of the Joint Pricing Committee  
for England.  
Newcastle upon Tyne

## Appreciated

A BIG 'thank you' for the excellent Price List which will make my homework much easier.—F.J.B.

## PRESCRIPTION POSER

THE sender of the prescription shown below, a Newcastle pharmacist, wrote that, despite the large number of scripts received from the doctor who wrote it, and 'who is on our doorstep,' he was completely at a loss. Fortu-

*See prescription.*

nately the patient himself gave the necessary information when discreetly approached. Curiously another look makes it obvious that the patient's information was accurate.



**C&D****CHEMIST AND DRUGGIST**

For Retailer, Wholesaler and Manufacturer

ESTABLISHED 1859

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TELEPHONE: CENTRAL 6565

## Hospital Pharmaceutical Supplies

It is regrettable, although not altogether surprising, to find that the Hunt Committee on hospital supplies organisation was not able to accept the contention of the Guild of Public Pharmacists that the hospital pharmacist can discharge his responsibilities to the patient and nursing and medical staff only if he himself is free to decide the source of supply of pharmaceutical items, and is himself responsible for quality control and their storage under suitable conditions (see p. 368).

The Committee will have been aware that the vast majority of group and chief pharmacists have already given up their right to make individual decisions about sources of supply in order to secure the economies which accrue from regional and joint contracting arrangements. It is true of course that most of the schemes at present in force are administered by pharmacists, or by committees on which pharmacists have majority representation, but once a decision has been made the individual must accept it whether he agrees with it or not. He cannot be allowed to opt out of the contract negotiated on his behalf and in those circumstances it is not difficult to understand why the Hunt Committee was not impressed by the argument that the right of the individual to choose the source of supply must be preserved at all costs.

The report proposes the setting up of a central supplies organisation to prepare specifications, to be responsible for quality control and the dissemination of advice, and to enter into contracts when that is financially or otherwise advantageous. Area supply units serving several groups, and each large enough to justify the employment of specialist officers, would undertake the preparation of specifications and the negotiation of contracts for items which had not been dealt with by the central organisation. Each area unit would be headed by an area supplies officer and the post of supplies officer at group level would disappear. Hospital Management Committees and boards of governors would continue to issue orders as at present but only in accordance with contracts negotiated by the central or area authority.

The Minister in a circular accompanying the report commends it to hospital authorities as a valuable contribution to an important subject. He accepts, with some reservations, the concept of a central supply organisation but he is not in favour of area units. The Minister of Health states that in his opinion supplies functions could be more efficiently organised on a regional basis.

If the area unit is considered to warrant the employment of specialist officers the same argument must apply to a regional organisation with even greater force. It may therefore be asked whether the team of specialists is likely to include a pharmacist. The Guild has for some time, so far unsuccessfully, been urging the Minister to appoint pharmacists at Regional Board level in order to improve the career prospects of hospital pharmacy. If the report is implemented the regional pharmacist may well become a reality — as a specialist in pharmaceutical supplies.

It is comforting to note that the Minister has taken the trouble to remind hospital authorities of the ruling given in May that pharmacists should be allowed to sign and issue their own orders without the necessity for countersigning by any other officer. That is the principle for which the Guild has fought unceasingly since the start of the National Health Service. Now it has finally been conceded but the right of the pharmacist to decide for himself where they should be sent after they have been signed has almost certainly gone for ever.

## Filling a Gap

DRUG research embraces many and varied disciplines, too varied it may be thought, for there to be enough common ground for an organisation devoted solely to its study. But the proponents of the new Society for Drug Research (see *C. & D.*, October 1, p. 316) did not share that view. They believed there was a need for a forum in which all who had an interest in drugs could discuss their work and their problems.

The venture began in the spring of 1965 when a group of people, mainly academic and industrial medicinal chemists, met under the chairmanship of Professor N. J. Harper (head of the pharmacy department, University of Aston in Birmingham) to explore the possibility of providing a forum for those interested in drug research. They had before them the problem of whether to break new ground with their own society, or instead to seek the assistance of some established organisation willing to form a drug research group. The latter course would have been the easier as it would have assured the availability of administrative and headquarters facilities, but an examination of the existing organisations showed that none had the broad basis that was sought. There were societies for pure chemists, for pharmacologists, biochemists, biologists, but none which provided for an exchange of views among the many disciplines in drug research. Each in its own way discussed drugs, but there appeared to be little opportunity to overcome interdisciplinary barriers.

One society, however, could claim to have a special interest in drugs and that was the Pharmaceutical Society of Great Britain. The group therefore approached the Society and was received with enthusiasm, gaining a favourable response to its request for liaison between the two bodies. Through that liaison the new Society for Drug Research should benefit from the experience of the Pharmaceutical Society and it has already received help in staging its inaugural meeting. The rules of the new society allow for the co-option to the committee of representatives of other bodies and it is anticipated that the liaison may be further strengthened by such an appointment from the Phar-



maceutical Society, though complete autonomy is being retained.

The society's function will be to arrange meetings and symposia. First symposium, to be held in London on November 30, will deal with the chemotherapy of nematode infections. Speakers from the Glasgow school of experimental parasitology will consider the problems arising from those infections, the economic aspects and the immunological aspects, while speakers from industry will discuss the activity of some recently developed compounds. Thus, in one session will be covered field aspects, economics, chemistry, biochemistry and the biological activity of new compounds, all in relation to one group of diseases. In any other society, only one or two of those parts could normally have been considered.

The proceedings of the symposia will not be published and it is hoped that an atmosphere of free discussion, in which speakers "talk" about what they are doing rather than give a lecture, will prove more conducive to the exchange of ideas, which is the committee's basic concept of the Society's rôle. It is believed that there is at present a gulf between those in academic and industrial life which prevents each understanding fully what the other is trying to do. Any opportunity for the two groups to get together must therefore be to the benefit of both.

So far about 110 applications for membership have been received and a committee and officers were appointed at the inaugural meeting (see p. 366).

The committee is made up of what its chairman describes as "like-minded individuals" and that is what any new enterprise needs for a good start. Professor Harper's hope for the society is that it should grow as it proves its usefulness, and not attempt too much too soon. In wishing success to the Society we are confident that that usefulness will soon become obvious.

## NEW BOOKS

### Commercial Marketing

ALAN GILLAM, F.INST.M.S.M. *United Commercial Travellers' Association of Great Britain and Ireland Inc.*, Knutsford, Cheshire. 8½ x 5½ in. Pp. 214. 21s. (incl. postage).

THE second textbook to be published by the Association it has been compiled by the same author who is a marketing consultant. In the cause of business he has visited North America and most European Countries where he has made a study of the sales methods employed. The textbook has been written to conform to the syllabus of Part II (sales organisation) of the Diploma examination of U.C.T.A. Among the sections dealt with are market research, distribution channels, sales aids and sales force, office organisation and export selling and procedure.

### Fundamental Chemistry

D. H. ANDREWS and R. J. KOKES. *John Wiley & Sons, Ltd.*, Glen House, Stag Place, London, S.W.1. 9¼ x 6½ in. Pp. XIII + 811. Second edition. 51s.

THE book surveys present-day chemistry on the basis of twentieth-century theories of atomic and nuclear structure. First chapter, which is on the architecture of the atom, is written in a popular style, and with a lucidity that is maintained throughout the volume. The second and third chapters deal in more detail with nuclear and atomic structure, introducing mathematics where necessary but always keeping in mind the difficulties of the non-mathematician. A chapter on chemical equations and stoichiometry provides a transition to a consideration of chemical bonding. Next are considered the various physical states in which chemicals occur, thermodynamics and chemical

equilibrium. Next come chapters on electrochemistry, oxidation-reduction reactions and chemical kinetics. A study of the periodic table is followed by chapters on metals and alloys and on complex ions. Organic chemistry and biochemistry are allotted one chapter, and the book concludes with a return to nuclear chemistry. Appendices outline the physics and mathematics needed for understanding the text and include a number of tables and an outline of organic nomenclature. A selection of problems is given at the end of each chapter.

## Onward from Galen

★ SPECIALISED BUT INTERNATIONAL ★

A new American monthly journal of hospital pharmacy, *Drug Intelligence*, is making its appearance in January, 1967. Its editor and publisher is Dr. Don E. Francke, formerly editor of the *American Journal of Hospital Pharmacy* and of *International Pharmaceutical Abstracts*. For many years Dr. Francke has been active in the International Pharmaceutical Federation, serving as a vice-president of the Federation and as a president of its Press and documentation section. *Drug Intelligence* is being distributed principally in the United States, but its character and scope will be international, with an editorial advisory board composed of hospital pharmacists from many countries. That, say the publishers, will make *Drug Intelligence* unique among hospital pharmacy journals. Policy of *Drug Intelligence* will be to make the pharmacist "more sophisticated in his knowledge of drugs and thus to enhance his ability to make intelligent judgments regarding them and their distribution as he serves the hospital, its patients, and the medical staff." Editorial offices are at 3145 O Street, N.W. Washington, D.C., U.S.A.

## Any Business Questions?

*I am a director of two companies — each owning one pharmacy. I work full-time as superintendent pharmacist of one, and a colleague runs the other. Can you tell me how the corporation tax will affect directors' fees paid from either business? There are only two directors of each company.*

It appears in this case that there is one director working in each company. The position then is that for the purposes of corporation tax the allowable remuneration for directors in each company would be £4,000. Thus, the director of company A would receive remuneration of up to £4,000 from that company and the director of company B would receive a similar sum from company B. If the companies paid directors' remuneration to each of the directors it would be essential that the directors' remuneration paid by each company did not exceed £4,000 since any excess would be disallowed for the purposes of corporation tax. Effectively, then, each director could receive remuneration of a sum not exceeding £4,000.

*I should like to ask how it could be arranged for a private limited company to use some of its profits each year to set up a trust fund? The object of the fund would be to make contributions, occasionally, to enable pharmaceutical prizes to be awarded, or, if enough money is available, to establish a scholarship to be awarded to a suitable student at a college in England or abroad.*

THE first fund should be established as a charity for the furtherance of education and the terms of the trust deed would require to be settled after taking proper legal advice. Once the charity trust was established the company could enter into a deed of covenant for a period exceeding six years to make annual payments to the charity. It would deduct tax at the standard rate of income tax from the payments made and pay this tax to the inland revenue. The charity would upon establishing its charitable status be entitled to make an income tax repayment claim and would recover from the inland revenue the tax so deducted by the company. Thus, the charity would be in receipt of the gross amount covenanted to be paid to it and the company would be entitled to make a deduction of the sum paid in computing its liability for corporation tax.



## PHARMACEUTICAL SOCIETY OF GREAT BRITAIN COUNCIL ELECTION PROCEDURE

### Publicising candidates' policies

**A** MEMORANDUM on Council election procedure which described the system by which candidates make their policies known to the membership was discussed at the meeting of the Council of the Pharmaceutical Society of Great Britain on October 4-5. The Organisation Committee had recommended that candidates be asked to limit voluntarily their electioneering to the statements circulated with the voting papers, it being understood that that would not preclude the submission to any periodical of brief biographical details. It was further recommended that the Council's policy should be explained to the Editors of pharmaceutical publications and that the branches should be kept fully informed of the Council's intentions in the matter.

#### *Only Scratched Surface*

MR. W. M. DARLING said that from the recommendation it would appear that the Committee had only scratched the surface of the problem. The only change appeared to be that candidates would be invited to submit policy statements to be circulated with the voting papers. No reference was made to the promotion of candidates' interests by other organisations, such as manufacturers or pharmaceutical companies. He asked the Committee to look at that aspect of the problem at its next meeting.

MR. W. J. TRISTRAM (chairman) replied that the matter had been fully discussed. In his view the Committee could not carry the matter further than had been stated in the recommendations. MR. DARLING said that the recommendations would not alter the present situation. What would be the situation, for instance, if next year the National Pharmaceutical Union with 11,000 members decided that it would be in its interests to promote certain candidates? Professor A. H. BECKETT supported Mr. Darling. Although candidates might not have been aware of what organisations were doing on their behalf, nevertheless organisations were entering the field, and in his view a clear statement of Council's views to all potentially involved parties was essential.

THE PRESIDENT (MR. J. C. Bloomfield) asked whether Council would accept the suggestion that wider publicity should be given to the matter.

MR. JENKINS recalled that the decision not to publish electioneering statements had arisen from the publication of a statement, the propriety of which might be questioned. The other important decision with regard to electioneering had derived in 1945 from the fact that some candidates were spending money on circularising the electorate. Some were in the position to do so and some were not, and for that reason it had been decided that there would be no personal expenditure by a candidate. With those limitations and voluntary co-operation he considered nothing more would appear to be necessary.

THE PRESIDENT said that it seemed that the Council agreed in principle but the question remained of the best method of bringing the recommendations into effect. If wider publicity were given it would resolve the difficulty.

MR. DARLING accepted the President's suggestion. MR. D. E. SPARSHOTT asked what the Editor of the Society's journal would do with any letters which were sent as a result of a candidate's policy statement. MR. TRISTRAM replied that the Editor had already agreed not to publish letters relating to the election of a candidate between the publication of the candidate's policy and the elections. The President's suggestion was adopted.

The Committee had, in August, received a report summarising the second membership survey conducted in Feb-

ruary. It had been noted that the retirement figure obtained by a 10-year projection of results in the second survey did not correspond to the figure obtained in the first survey which had been conducted by the Economist Intelligence Unit. It was recommended that the Economist Intelligence Unit be asked to investigate the matter and that more detailed analysis should be done on a regional basis of the figures obtained. The report was received and the recommendations adopted.

MR. TRISTRAM reported on a meeting of officers and chairmen of Council standing committees held on October 3 to prepare an interim report on the resolutions passed at the Branch Representatives' meeting in May. The Council recommended that the report be published. Among items of publicity during the month was an article on general pharmaceutical practice, based on information supplied by the Society, published in *Reveille*. The Committee noted the publicity which had been obtained following the symposium on drugs legislation at the British Association meeting at Nottingham and recorded its appreciation of the address given by Mr. Lewis Priest at that symposium.

The minutes of the Registration Committee were presented by the chairman, MR. J. E. BALMFORD. It was reported that sixteen persons had been registered as "student" in August and forty-six in September, compared with thirty-four and eighty-two registrations, respectively, in August and September 1965, making a total for the year of 169 registrations compared with 255 registrations for the same period in 1965.

MISS M. A. BURR presented the minutes of the Benevolent Fund Committee and reported that work had been put in hand to provide an extra bathroom and to make improvements in the staffs' and guests' laundrettes at Birdsgrove House. The Committee had recommended that the usual Christmas gifts be made to annuitants and persons receiving grants from the Benevolent Fund and to dependent children. It was decided to make donations of £10 10s. to Read's School and to the Royal Wanstead School. Grants had been made or were recommended in respect of 11 widows, five members, two orphans, and two dependants of members. The minutes were received and the recommendations adopted.

The minutes of the Finance and General Purposes Committee were presented by the treasurer (MR. H. STEINMAN) who reported that the Society had been given notice that all the properties in York Place, Edinburgh, had been listed as buildings of special architectural or historical interest under the Town and Country Planning (Scotland) Act.

MR. J. P. KERR (chairman) presented the minutes of the meeting of the Practice Committee, together with those of the subcommittee on general practice.

#### *Collection of Prescriptions*

The Society's policy in respect of collection points for prescriptions was discussed and it was resolved that a letter should be sent to Executive Councils suggesting that where there were special circumstances which made it difficult to comply with any of the four points of the Council's existing policy, the Society should be consulted for a ruling.

A report had been received following discussions with the A.B.P.I. on the publication of retail prices for preparations available on prescription. The following recommendations had been accepted:

1. The Society recognises that manufacturers must



publish a basic N.H.S. price for medical specialities.

2. When manufacturers wished to publish a "retail" price for products available only on prescription, such prices should be denoted by an asterisk or some other mark which would indicate that when supplied to the public those products might be subject to a dispensing fee. The Medical Specialities Manufacturers Division suggested that suitable wording for those prescription-only items be "Prescription only—when dispensed may be subject to a professional fee."

The Council approved the agreement.

The minutes of the Publications Committee were presented by the Chairman, MR. E. A. BROCKLEHURST. The Committee recommended the acceptance of a proposal to produce a set of notes which, read in conjunction with the booklet at present included with the Society's set of forty colour transparencies, would adapt the slides for sale in the United States and Canada. It was reported that over 26,500 copies of the British Pharmaceutical Codex 1963 had been sold, and nearly 11,000 copies of the 1966 Supplement. It was reported that a proposed advertisement in the Society's journal for fur clogs had been refused.

### *Inconsistencies in Policy*

Mr. Brocklehurst explained that the advertisement had been refused by the office and that that decision had come to his Committee for confirmation. In the Committee there had been a majority of one in favour of accepting the advertisement but after the vote had been taken it had been stated by two members who had voted in favour that they had done so to draw attention to inconsistencies in the Council's policy for accepting advertisements. MR. KERR suggested that it was ridiculous, when a meeting had been held in the Albert Hall with the object of restricting the range of goods sold in pharmacies, that such an advertisement should be accepted. MR. HOWELLS said that the matter had arisen because of the Council's illogical approach to advertising as a whole and MR. MAPLETHORPE said that in voting for acceptance of the advertisement he had succeeded in his purpose to have the matter discussed by the Council. The Committee's recommendations of acceptance of the advertisement was rejected.

An advertisement was considered for a pharmaceutical product which offered quantity terms enabling pharmacists to give a commission on sales of 1d. or 2d. a bottle. The implications of the advertisement had been considered by the Ethical Committee, which had recommended its rejection. The Publications Committee recommended the refusal of advertisements advocating the giving to sales staff of commission on sales of products where recommendation to the public was a matter for the pharmacist's professional judgement. It was reported that the Publications Committee had discussed the acceptance of advertisements for non-medicinal products, and that, in that connection, the Ethical Committee was reconsidering the Council's statement on sales promotion in pharmacy (see *C. & D.*, November 14, 1964, p. 488).

Presenting the minutes of the Law Committee MR. D. E. SPARSHOTT reported that during July and August the premises of 1,658 authorised sellers and 880 traders had been inspected. Twenty-two cases of alleged infringements under the Pharmacy and Poisons Act, 1933, and one under the Pharmacy Act, 1954, were considered. It was recommended that proceedings be instituted against eight authorised sellers and three traders and that warning letters should be sent to nine authorised sellers and one trader.

The Committee had considered a letter, forwarded by the Home Office for comment, concerning the toxicity of American mandrake (*podophyllum rhizome*) and its suggested control as a poison, following its suspected use as an abortifacient. It was recommended that the Poisons Board should be asked to consider American mandrake

together with other substances used for similar purposes. It was further recommended that the attention of the Home Office should be directed to the sale of substances or preparations used as abortifacients with a view to the prohibition of the sale of those substances or preparations in the new medicines legislation. The minutes were received and the recommendations adopted.

MR. DARLING (chairman of the Ethical Committee) reported that a brochure inviting retailers to participate in a scheme promoted by Club International, Ltd., had been considered. It was recommended that pharmacists be advised not to participate in the scheme. An article in a local resident's association newsletter had also been considered. It referred to a pharmacist's agreement to allow discount on all goods except medicines and baby foods. It was resolved that the pharmacist be informed of the Council's objection to the publication of a pharmacist's name in connection with a discount scheme.

A letter had been received from the Chartered Society of Physiotherapy requesting advice on the matter of discount given by pharmacists to its members. The letter had referred to National Pharmaceutical Union comments on the wording of a note about discounts printed on the annual subscriptions form for that society. The Committee wished to be associated with the view of the N.P.U., that the Society of Physiotherapy should state that all pharmacists may give physiotherapists discount. The council, agreed that an informal discussion should take place with the Society of Physiotherapy and that inquiries should be made with regard to the procedure of other professional associations.

The Committee considered a request from Welcome Wagon (U.K.) that lists of pharmacies should be included in the booklets which they distributed when calling on new residents in a locality. It was resolved that no objection be raised provided that the list included the addresses of all pharmacies in the area.

Consideration had been given to a request from the British Dental Association that pharmacists should not be associated with dental repair services operated by dental technicians or other persons. It was recommended that two pharmacists known to offer such services be informed of the Association's views.

The minutes of the Committee for Education and Science were presented by the chairman (MR. J. B. GROSSET). It was recommended that the B.Sc., degree in pharmacy to be awarded by the Heriot-Watt University be approved. It was also recommended that the ordinary B.Sc., and honours B.Sc., degrees to be awarded by Brighton College of Technology under the auspices of the Council for National Academic Awards, be approved. It was also recommended that the following subcommittee be appointed to consider applications received for the Society's research awards: Dr. D. Jack, Mr. C. W. Maplethorpe, and Dr. T. D. Whittet. It was recommended that Dr. M. R. W. Brown be designated a fellow of the Society under the by-laws, Section III (3).

## NEW FILMS

### *A Touch of Rheumatism*

SOUND-SERVICES, LTD., Wilton Crescent, London, S.W.19, for *Arthritis and Rheumatism Council*, 8 Charing Cross Road, London, W.C.2. 16-mm. Colour. Running time 25 min.

THE film shows rheumatism in its various forms—arthritis, "slipped-disc," lumbago, poker-back, gout, etc., and illustrates the wide extent and effect of the disease and the attack that is being made on it. The film takes one into the laboratories in which the Arthritis and Rheumatism Council sponsors or finances research into the obscure problems of arthritis, into workshops in which technicians invent and design equipment to ease the sufferer's difficulties, and into hospitals and clinics in which patients suffering from the disease are treated.



# Development and Use of Drugs

## BRITISH ASSOCIATION SYMPOSIUM

THE physiology and biochemistry section of the British Association for the Advancement of Science devoted the afternoon of September 6 to a symposium on "The Development and Use of Drugs" at the Association's recent annual meeting. Reports of a number of the papers read are presented below.

First speaker was Dr. G. E. Paget (Smith, Kline & French Laboratories, Ltd.) who spoke on "The Development of a New Drug in a Pharmaceutical Firm."

DR. PAGET said he would describe the early stages in the development of drugs and comment on some of the implications. It was sometimes argued, he said, that a central authority could do more efficiently and economically the task now performed in this country by some dozen or so industrial pharmaceutical laboratories, and by a much larger number if the total international research effort were considered. As a matter of historical fact, no important drug had been discovered and developed in any existing centralised, governmental research laboratories. Even if a central authority were charged with the responsibility of discovering new drugs, it would, if it were wise, evolve a system such as would be almost indistinguishable from the multiple, decentralised laboratories now the property of the pharmaceutical industry.

### Decisions to be Made

First step in starting work leading to the discovery of a new drug was to decide in what area the work would be deployed. For preference, it should be concerned with a disease of serious significance to large numbers of people. That course was dictated by humanitarian as well as by commercial considerations. Next it must be determined whether ideas for work in the chosen area already existed or could be generated. That pre-supposed access to a wide knowledge of modern chemical, biochemical and biological research, and, perhaps more important, the type of scientific imagination that could derive from such knowledge those new correlations that would suggest that in some particular area a new approach might be possible. Sometimes it might appear sensible to devote considerable effort to the improving of existing drugs. That was sometimes spoken of derisively as "molecular manipulation" or "molecular roulette" but from the original discovery of the antibacterial action of Prontosil a succession of steps, each relatively small, had led through the early sulphonamides to the more effective, less toxic later derivatives. At the same time, however, chemical developments and biological discovery led from the sulphonamide antibacterial agents to the sulphonamide carbonic anhydrase inhibitors and to the sulphonyl urea anti-diabetic drugs.

Having decided on the field in which to work and generated some ideas, pro-

posed work must be shown to be technically feasible. For many years, for example, it was clear that steroids filled important biological functions. Work on them, however, was not possible since the chemistry of steroids was unmanageable with the techniques then available. The development of drugs for many important diseases was hindered, or might even be impossible, because no useful laboratory model in experimental animals or otherwise had been developed. Multiple sclerosis, rheumatoid arthritis, arteriosclerosis, and schizophrenia were all diseases on which research was so handicapped.

### Staff and Equipment Needed

Development of technical effort, owing to the fact that the majority of drugs were synthetic chemicals, necessitated a team of synthetic chemists with all the necessary ancillary facilities. The chemists would need biological support, and again modern biologists could not be effectively employed unless a large range of ancillary scientists and highly expensive equipment was available to them. Recent increases in knowledge about the way the body behaves as a chemical machine made it imperative to draw in biochemists and they too needed technical assistants and expensive apparatus.

As a very rough rule of thumb applicable in this country, one could say that even to engage in one research project might cost about £94,000 a year, including the cost of all those facilities, ancillary scientists and technical assistance required in direct relationship to a scientist of the primary discipline under consideration but excluding less directly related services, such as library facilities, instrument workshops, administrative and other office staff, etc. Because of the ancillary services needed and for other reasons, it was not reasonably economic to deploy a single team and summing all the necessary facilities and staff, it was probable that any fully organised pharmaceutical research laboratory capable of discovering and developing a new drug from scratch would cost between £½-1 million a year. Some units did cost less than that, but must rely heavily on outside resources. Some, of course, cost vastly more and the largest laboratories engaged in pharmaceutical research would be spending upwards of £5-6 million a year on their research and development operation.

Having established our laboratory and commenced work it must be expected that even with the greatest of good luck it would be an appreciable time, perhaps two or three years, before a significant discovery emerged worth thinking of developing into a drug. No one had the right to expect such good luck, and as an example, most major pharmaceutical firms had been seeking antiviral drugs for ten or fifteen years. Only in the last two or three years had any such substances been discovered, and so far as the

speaker was aware, only one had so far been marketed.

Nevertheless, virological research must have cost the pharmaceutical industry a sum approaching £100 million on a world basis. It could be seen that pharmaceutical research called for unusual qualities of courage and confidence in their employees from the management of pharmaceutical companies. Sometimes, the even harder decision must be taken to close down work on which, possibly, vast sums had been expended. Such decisions called for fine judgment, deep knowledge of the problems, and awareness of commercial reality. One wondered if a government sponsored central research organisation could ever display either that judgment or that resolution.

Assuming that one of the research teams had shown a substance had activities leading them to suppose that it might be a useful drug, any temptation at that point to make public announcements and to engage in jubilation was sadly premature, since with extreme skill and luck, only after some five years would the drug be marketed.

### Consolidation

The initial discovery of desirable activity must be confirmed, related chemicals synthesised, their activity examined, and one chosen for further development. Concurrently, a wider study of the biological properties of the agent would be in progress to define as closely as possible the biological action and the mechanism by which it was produced.

Two important processes then remained before the drug could be administered to humans. First was the determination of the safety of the potential drug. Experience showed that a majority of the chemicals with desirable biological actions were also shown by such an investigation to have such undesirable actions that their use in man could not be contemplated. Second procedure was the satisfying of a regulatory agency that such a trial was reasonable and justified by investigations up to that point. In this country the function was carried out by the Committee on Safety of Drugs. If the drug passed those hurdles, study of its effects in man could be begun. Practice in that phase of the investigation varies from country to country. In Great Britain it was wholly in the hands of clinical investigators employed by the universities, the Health Service or the Medical Research Council who were wholly independent of the pharmaceutical company. In this country too it was not the practice of pharmaceutical companies to pay for such investigations except in minor matters of out-of-pocket expenses or cost of special equipment. The clinical investigator would, therefore, require to be convinced that the drug was sufficiently important and well studied to be worth the expenditure of his time and effort. That was a highly desirable state of



affairs that should not be interfered with, since it preserved responsibility for clinical investigation with the clinical investigator where it belonged.

#### Shortage of Clinical Investigators

Main difficulty at that stage lay not in the conduct of such trials, but in the absolute shortage of trained clinical investigators. In consequence a number of investigations were carried out by individuals who, although good doctors, had not been trained in the special disciplines required adequately to investigate a completely new potential drug. In the speaker's view the universities and successive Ministers of Health had been gravely negligent in their failure to provide facilities for training such people, and there was no sign that, despite the establishment of a number of small units concerned with such training that that negligence was likely to be righted in the near future. That attitude also did not inspire confidence that any central scheme of clinical drug evaluation would be an improvement.

The investigator would eventually be able to tell whether the drug possessed the properties for which it was selected, and whether it had any other features, desirable or undesirable, that would cause a modification of view about it. He would not often be able to say how useful the drug would be in the treatment of a given disease, nor to tell whether undesirable features affecting only a small number of people would limit its usefulness. Those facts must now be determined by a more extended investigation, this time using practising doctors as investigators.

In the meantime major problems in the production of the drug would have been tackled and problems in finding an appropriate pharmaceutical form have been solved. The clinical investigators would have raised questions requiring chemical, biochemical or pharmacological investigation; and during this phase of the development of an important drug the laboratory would present a crescendo of increasing activity. Even yet, however, the drug might meet pitfalls. Another company might develop a better drug that removed the reason for the drug being developed. Sometimes one's own drug might fail to show sufficient activity for it to be truly and widely useful and sometimes, undesirable actions would be disclosed by wider investigation. Probably not more than one drug in three or four on which wide clinical trials were commenced survived to become a saleable commodity. However, should a point be reached when it became clear that the drug represented a useful addition to medicine a decision would be made that it should be marketed. Then too the regulatory agency must be brought into the matter again and all the evidence leading to that decision submitted to them, together with an account of the claims it was believed could be justified for the drug. Before the drug could be marketed, the regulatory agency must signify that they did not disagree with the decision or with the claims for the drug, and then, at last, the drug could be sold.

Summing up the speaker said it seemed probable that the future tendency would be for new drugs to involve at least as much effort as that described, possibly the majority could come to involve more. As society was at present organised an effort on the scale described was only possible if at the end the effort could be rewarded and sufficient funds derived for its continued support. With many industries the product was such that it could not readily be pirated but a drug, once discovered was sometimes a chemical that could be easily synthesised by any mediocre chemist in his garage. The product might not be as pure or as effective as that of the original maker, but it would be sufficiently cheaper to attract the rapacious attention of those whose only concern was to buy the minimally adequate for the least expense. In this country that undesirable state of affairs was ostensibly prevented for the most part by the granting of patents, but it was common knowledge that only in the field of drugs had the protection of a patent been seriously challenged, and that on occasion the Government had thought proper to import from countries where patent law did not run, drugs that were in effect property stolen from their original discoverers. To do that the Government had used loopholes in the patent law left with probably quite different intentions anyway. Nobody who was familiar with the processes of discovery and development of a drug would maintain that wherever those processes took place, in industry or government, the return from such discovery should be freely available to those who had taken no part in it. That was not to claim that the patent situation in respect of drugs was wholly satisfactory, even with the removal of the obvious loopholes, and it should perhaps be reviewed.

#### Poisons Control Drawbacks

MR. L. PRIEST (Pharmaceutical Society of Great Britain) speaking on "How Does Legislation Protect the Public from Poisoning?" after describing the statutory controls over the use of medicines went on to say that there were, naturally, many inadequacies in present controls. If a new substance or combination of substances did not fall into a controlled category it might be manufactured and distributed without restriction. Should it have properties hitherto unsuspected or unknown, or a greater potency than existing products, it might sooner or later give rise to toxic reactions. Unless a manufacturer asked the Poisons Board to include his product in the Poisons List, the Board would not consider the compound until it had been shown to be a hazard. The pharmaceutical industry generally informed the Board of new developments, but that course was not mandatory, and there might be a considerable delay before it was decided whether to control the compound or not. There might then be a further lapse of time before the Board's recommendations became law.

No Act of Parliament prevented excessive prescribing by doctors, or de-

liberate hoarding of medicaments by patients. It was thus impossible to prevent deliberate or accidental poisoning or to stop misuse and addiction. Nor had it been possible to prevent illicit trading in addictive drugs.

In addition to the statutory controls a number of extra-statutory safeguards existed. One of those was the Dunlop Committee, which had asked all manufacturers intending to develop or market a new substance or combination for human treatment of prophylaxis to submit reports of the toxicity tests carried out and of clinical trials. If the Committee was not satisfied that safety or fitness for the purposes intended had been adequately demonstrated, it might advise against proceeding to market. Of over 1,000 submissions considered last year, the Committee advised against marketing in nineteen cases, and another 119 submissions were withdrawn by the manufacturers. The Committee also considered some 4,000 reports of adverse reactions to drugs sent in by doctors and pharmacists throughout the country.

Whilst the Dunlop Committee might advise against the marketing of a new drug there were several thousand preparations available which, because they were in use before the Committee was set up, had not been considered. From time to time they might cause problems, and the Council of the Pharmaceutical Society then advised pharmacists what action needed to be taken.

Some control had been imposed on the advertising of medicines and treatments, and the "British Code of Standards" drawn up soon after the 1939-45 war by the Advertising Association placed a voluntary restraint on the claims that might be made in advertisements. In general the strict letter of the Code was observed, but many advertisers and newspapers ignored its underlying principles. The Code had the support of the Proprietary Association of Great Britain, which also laid down requirements as to labelling that might be additional to those imposed by law. Unfortunately, cautionary statements on labels did not always provide an adequate warning. Few persons read labels carefully, and many disregarded warnings.

#### Responsibility and Restraint

Although a consolidation of all the Acts of Parliament affecting drugs was urgently needed legislation alone could not protect the public from danger, thus a great sense of responsibility by the professions and restraint by the public were essential. The time had come seriously to consider which was more important—safety and well-being or ready access to potent drugs for self-medication. Would not the average person be prepared to exchange convenience for the benefit of expert advice and relative protection? If medicines were obtainable only from qualified sources, medical or pharmaceutical, the public would be better protected. As a first step, the Pharmaceutical Society had recommended that all medicinal substances should be controlled by law and be available only on a doctor's prescription unless known to be harmless and that they should be



available to the public only from those who understood the properties and effects of drugs and medicines.

The public must, however, accept a certain amount of restraint in return for more protection, and should not expect, as at present, to be supplied with drugs and medicines on demand. The pharmacist must be satisfied that there was good reason for supplying a preparation, that it was not contra-indicated, and that side effects were unlikely to arise.

Restraint was also required from doctors in their prescribing habits. Now that prescription charges had been abolished, there was no excuse for writing prescriptions for six months' supply or for giving out potent tablets by the hundred. The principle that doctors might prescribe whatever they considered desirable for their patients besides being costly for the nation, could also be dangerous for the patient, and undesirable socially. It would be preferable to achieve that restraint voluntarily with the continued co-operation of the medical profession. For the sake of safety it would also be advantageous if doctors were to write clear and proper instructions for every medicine prescribed.

Manufacturers of medicines must be prepared to accept restraint in advertising to the public. Many members of the medical and pharmaceutical professions held that the advertising of medicines to the public was contrary to the public interest, as it encouraged self-medication, when expert advice should be sought.

#### Press and Radio "do Harm"

Much harm had been done in recent years by the interest in drugs created by newspaper articles and radio and television programmes. Pharmacists had reported increased demand for drugs receiving such publicity. Mr. Priest asked the Press to show a greater sense of responsibility. In the interest of the public, he said, the names of drugs should be withheld by the authors of general articles and from reports of convictions for drug offences. Where a drug was named, people of all ages tested its effect on themselves, especially if they believed they showed symptoms that might be helped.

Mr. G. J. WILKINS (chairman, Beecham Pharmaceutical Division) addressed the audience on "Responsibility in the Marketing of Medicines."

Whether some people realised it or not, he said, the fact was that industry was, and was likely to continue to be, the major innovator of new medicines. Industry was run by businessmen whose aim was to make a profit and to build a stable and growing business. That was only possible if a need existed for the products they made and if the products were used. In pharmaceuticals the latter required that the products were prescribed by the medical profession and for that to happen doctors had to be convinced that they were both effective and safe.

After dealing with the factors to be considered by a company before it decided to market a new product Mr. Wilkins gave a number of axioms.

*No product however good sells itself.* While not proposing to justify the use of sales promotion, or marketing he asserted that that activity was almost as important as discovering the product in the first place.

*The problem that must be faced for each product is how it can be marketed in the most efficient way.* The problem of efficiency of marketing (to spend the minimum amount on promotion to achieve the desired results) was not easy of solution.

#### Media Available

Marketing methods available consisted mainly of: (a) Symposia and meetings; (b) medical representatives; (c) samples; (d) booklets and file cards; (e) films; (f) journal advertisements; (g) mailings.

Whether to use all or only some of those available media became a management decision based on the particular product and its estimated properties and the assessment of its probable use. Generally it was decided to use a combination rather than one only.

For a new product a symposium or meeting where the properties of the medicine could be described to its potential users was the most effective. However well documented a published clinical trial might be, there must be many questions a doctor wanted answered before he could decide to use a product for his own patients. At a symposium those questions could be answered authoritatively.

The next best alternative was a visit to an individual doctor by a medical representative. The standard of medical representation had improved tremendously in the last few years asserted the speaker. A recent survey had shown that no less than 74 per cent. of general practitioners found representatives either essential or in some degree necessary.

Providing a sample of a new product could be extremely useful. If the sample was used it could be an economic form of promotion. Booklets and file cards were intended to be the authoritative source of information from the company, giving maximum details about a product. They contained detailed information and were intended as a reference source by a doctor before he prescribed a product. Films could be a valuable tool but since they took time to make they were usually only available some time after a product had been launched. Most films were made not to promote a specific product but to be instructional about a particular project and were mainly used at meetings for instruction and to form the basis of a discussion.

Journal advertisements and mailing had been left until last since they seem to provoke more criticism than anything else and had been grouped together since although different they fulfilled the same purpose which was to remind a doctor of the availability and properties of a product. They were designed to attract attention and must do so if they were to be effective. That occasionally led to criticism that they were too glossy, irrelevant etc. There were some bad mailings but on the

whole they did their job without being offensive. As reminders they were wasteful in that not every one was read or examined. Unfortunately there was no easy way of finding out which doctors were interested in receiving mailings about a particular product. Some progress had been made in preparing mailing lists of specialist doctors so that literature could be directed to specific groups likely to be interested in particular products.

Available evidence indicated that a much higher proportion of doctors than was often alleged read mailings and advertisements in medical journals. Two thirds of all general practitioners claimed to open all their mail and keep some of it for reference.

From some critical reports on the contents of advertisements and the basis of the information one would imagine that industry made up the claims for products without any reference to the facts or authoritative opinion. That of course was not true. It would be very short-sighted for any company to make grossly extravagant claims for a product. The medical profession would soon find out that the product was not fulfilling the claims and would stop using it. Additionally it would have little faith in any claims made for other new products coming from that company. All reputable companies ensured that promotional literature, representative knowledge, etc. were as up to date as possible, not only of revisions in favour of a product but also about the not so good if that happened to be the unfortunate rare occurrence.

#### Differing Opinions

The accusation that any one claim for a product was exaggerated was often a matter of professional opinion and must be examined against the background of the accuser as well as the merits of the product. Medicine unfortunately was an inexact science and widely differing opinions were genuinely held.

Replying to critics who said that by promotional practices the medical profession was persuaded to prescribe products unnecessarily the speaker rebutted by saying that the decision to prescribe or not was made solely by the doctor. If he decided to prescribe for his patient then by marketing methods a company had tried to make sure that he was aware of the availability and properties of particular medicines so that he could decide which was likely to be most suitable and efficacious for his particular patient.

#### N.H.S. STATISTICS

In COVENTRY during May 139,796 prescriptions (94,994 forms) were dispensed. Total cost was £68,275, an average of 117.21d. per prescription.

In ENGLAND during June 19,556,239 prescriptions (12,919,544 forms) were dispensed at a total cost of £10,412,890. Average cost per prescription 127.79d.

In BRADFORD during June 1966 162,336 prescriptions (105,571 forms) were dispensed. The total cost was £83,357, an average of 123.24d. per prescription.



## INTERNATIONAL PHARMACEUTICAL FEDERATION

## Pharmacist's Rôle in Health Education

## A GENERAL ASSEMBLY SYMPOSIUM

DISCUSSING the social rôle of the French pharmacist in health PROFESSEUR ANDRÉ QUEVAUVILLER, said it was difficult to separate hygiene from social aspects. Since 16,000 pharmacists were in contact each day with two million members of the public in a pharmacy open to them all in which each could confide his anxieties to a man or woman, it was in the nature of things that the pharmacist should be considered an adviser in a variety of subjects. There was some suspicion among doctors, based on historical considerations, that pharmacists might be usurping a therapeutic rôle, especially for the poorer sections of the community, but since the advent of social security nobody hesitated to consult his doctor, and advice on those lines by the pharmacist had become customary. The pharmacist's advice, therefore, was increasingly orientated to social and personal aspects of social and individual health and hygiene related to the proper use of medicaments.

**Social Adviser**

It was the facility of access in an open shop for nine hours of the twenty-four and the certainty of finding there an informed and friendly person that had gradually imposed on the pharmacist the rôle of social adviser. For example pharmacists could, by a card to young mothers, remind them of the need for vaccinating their children. The pharmacist has his contribution to make on public bodies concerned with public health. That may imply the need not to be always present in the pharmacy. But it is not less imperative that the young qualified should be encouraged to exercise their responsibilities and that the man with the experience should little by little efface himself from his counter in order to allow others to acquire and profit by a larger audience.

DR. J. LESUR, who took as his title "The Pharmacist: Permanent Actor in Health Education," said it might appear commonplace to affirm that the pharmacist is so by reason of his being dedicated to safeguarding health.

Quite simply the pharmacist is the man of the medicament. The statistics of all countries show that the consumption of medicaments does not cease to increase and does not seem likely to do so. There is also a vulgarisation of medicine. Each day the Press, radio and television invade the home, putting in the hands of each individual a lot of health information, awareness and advice more or less elementary, more or less valid, more or less assimilated according to the degree of receptivity of the hearer whether sick or well, and according to his cultural level and state of mind. As one pharmacist put it, medicines, formerly regarded with respect, have become household goods. The development cannot but have

many consequences. Some good, some pernicious. Side by side with that consideration is the evolution of the medicament itself, widening as knowledge grows of animal and vegetable life, of the basic sciences of anatomy, physiology, biology, and as experiments multiply in all directions. Research in the applied pharmaceutical sciences expands releasing a multiplicity of new products whose complexity, activity, and quality are alike high. Problems of manufacture, utilisation and absorption by the patient. The pharmacist in general practice upon whom converge the greatest number of informative documents (technical, advertising, commercial) is better placed than the research worker or industrialist to appreciate the magnitude of that evolution. That leads me to say that the profession of general practice is more difficult to exercise now than formerly. The danger of errors, or of a wrong usage of medicaments has not ceased to grow, bringing with it the need for a stricter control. In each country it is followed by modifications in pharmacopoeias and regulations. In this evolution it is in the nature of things that there should be a need for a technician trained to hand out the package, ever more active and dangerous and the more obvious it becomes that the pharmacist alone measure up to that function. Who indeed, could replace him. The extent and variety of his knowledge, his constant presence close to the public, his permanent contacts with the sick person, as well as of explaining the detail of a treatment of discerning an error in prescription, of giving details of the conditions of use or the dangers of digitaline or of aspirin, of a skin cream or hair lotion, warning of the simple abuse of a tranquilliser, helping a sick person to avoid the unhappy consequences of building too much on information or advertisements improperly understood or a false similarity of apparent symptoms; replying to the thousand-and-one questions encountered in the shop.

**Advice on Diet**

But the pharmacist's participation in health education does not stop at the medicament. He has to explain the details of a dietary regime, the requirements of infant feeding or dental hygiene, to warn the housewife of dangers in fungicides, detergents, insecticides and household products of various kinds, in country districts to warn of dangers in a veterinary medicament, to a sportsman the dangers of a stimulant. All that is part of the routine of a shop pharmacist. In towns he is often the first port of call after an accident, a collaborator in the fight against epidemics, contagious illnesses or social scourges (malaria, leprosy, etc.). The sick comes to him as to a person of integrity and much more

than a seller of products. It is important that the pharmacist should respond to that special regard for his services. The pharmacist must know that his influence, and the effectiveness of his action will be all the greater if he shows himself competent and disinterested.

**At the Centre**

Discussing "The Pharmacy as a Centre for Health Education," Mr. ALLEN ALDINGTON gave a reminder that for centuries the pharmacy had been a centre for information on health matters for members of the public, and on drugs and treatments for the allied professions. 'The training of the pharmacist gives him today a pre-eminent position at the central point for information concerning drugs and treatments. The mass of literature produced by manufacturers concerning new developments, the critical appraisal in the pharmaceutical and medical journals, together with the factual information from official sources such as the pharmacopoeias and other publications give him adequate material. The pharmacist can pass it on to the prescriber in his language or to members of the public in their language.' The pharmacist was also concerned with the presentation of medicines in their most suitable and acceptable dosage form and the future would see him co-operating more and more with the physician in the selection of the proper treatment after a diagnosis had been made. During 1963-64 the American Pharmaceutical Association, in co-operation with the United States Public Health Services, had used a research organisation to determine the attitude of the public towards the pharmacist as a source of health information and the pharmacy as a centre for health education. The conclusions of the survey had been conveyed to the International Health Congress held in Madrid in 1964. It was obvious that the participating pharmacist had increased his knowledge and his personal prestige locally, his awareness of health matters and, therefore, his value as a member of the health team. The success of the experiment had encouraged the American Pharmaceutical Association to make stands holding health education leaflets available to all of its members, who had been asked to contribute \$144 annually towards the provision of the service. In Great Britain there had been many special schemes in which pharmacists had co-operated for specific purposes, for example in respect of tuberculosis, poliomyelitis and diphtheria immunisation. The most useful work in Great Britain was the "Medicines — with Care" exhibition, launched in May 1965.

Finally, Mr. Aldington suggested the time had come for an international symbol, registerable in any country, to denote a pharmacy.



## TRADE REPORT

The prices given are those obtained by importers or manufacturers for bulk quantities or original packages. Various charges have to be added whereby values are in many instances augmented before wholesale dealers receive the goods into stock. Crude drugs and essential oils vary greatly in quality and higher prices are charged for selected qualities.

LONDON, October 12: Little trading was recorded during the week and CRUDE DRUG prices remained at their former levels.

Information about new crop material continues to give rise to movement among ESSENTIAL OIL prices and some items are becoming scarce. With BUCHU leaves now almost unobtainable the oil is firming, and a similar position holds for CINNAMON due to the difficulty of obtaining quills of suitable quality. A better crop than has been obtained for the past two years has led to the price of LAVANDIN oil becoming easier, while higher figures are being obtained for LIME and American SPEARMINT.

Among PHARMACEUTICAL CHEMICALS, MERCURY prices are higher both for the metal and salts. PYRIDOXINE was marked higher during the week.

### Pharmaceutical Chemicals

Where material is of foreign origin prices given below may be subject to import surcharge.

ANEURINE.—HYDROCHLORIDE (per kilo) in one-kilo lots, 102s.; 10-99 kilos, 100s. per kilo. The MONONITRATE is 107s. and 104s. 6d. for similar quantities.

ASCORBIC ACID.—One kilo, 35s.; 10-kilos, 31s. 6d. per kilo; 25-kilos, 30s. Coated is 2s. 6d. per kilo more and SODIUM ASCORBATE, 7s. kilo more than the acid.

CALCIFEROL.—One-kilo lots are from 2s. 7½d. per gm. in standard packages.

CALCIUM PANTOTHENATE.—92s. 6d. per kilo for 1 to 9 kilo lots.

CYANOCOBALAMIN.—100-gm. lots are 52s. 6d. per gm.

FOLIC ACID.—B.P. and U.S.P., 1-kilo lots, £19 7s. 6d. per kilo.

HYDROXOCOBALAMIN.—For 100 gm. lots, 105s. per gm.

INOSITOL.—One kilo, 100s.; 10 kilos, 90s. per kilo.

MENAPHTHONE.—(50-kilo lots) B.P. 112s. 6d. per kilo; ACETOMENAPHTHONE, B.P., 122s. 6d.; WATER-SOLUBLE (menadione sodium bisulphite), 78s.

MERCURY SALTS.—Per kilo for under 50-kilo lots—AMMONIATED powder, 129s. 9d.; PERCHLORIDE, 111s. 6d.; SUBCHLORIDE, 128s. 6d.; OXIDES, yellow, 134s. and red, 139s. IODIDE (25 kilo lots), 95s. 6d.

NICOTINAMIDE.—(Per kilo). One kilo, 39s.; 10 kilos, 36s. 6d.; 50 kilos, 34s. 9d.

NICOTINIC ACID.—One kilo, 32s.; 10 kilos, 29s.; 50 kilos, 27s. per kilo. Feed grade, 21s. to 23s. kilo as to quantity.

NIKETHAMIDE.—50-kilo lots are 52s. 9d. per kilo.

D-PANTHENOL.—One to 9 kilos, 170s. per kilo.

PYRIDOXINE.—One kilo, £13 2s. 6d. per kilo; 10 kilos, £12 17s. 6d. per kilo.

RIBOFLAVINE.—One-kilo, 187s. 6d. and 10 kilos, 182s. 6d. per kilo. Feed-grade, minimum 96 per cent., 160s. and 155s. respectively.

VITAMIN A.—Synthetic. Supplied in various concentrations as acetate and oil-soluble palmitate at 2½d. per m.i.u. for up to 10,000 m.i.u. lots.

VITAMIN D.—D<sub>2</sub> powder for tableting 850,000 i.u. per gm. 125s. per kilo; in oil, 1 million i.u. per gm. 67s. 6d. per kilo for 100,000 m.i.u. Crystalline: see under calciferol. D<sub>3</sub> in oil (1 mega per gm.), threepence per mega for less than 100-gm. ampoule.

VITAMIN E.—Natural *d* alpha tocopheryl acid succinate, hydrogen salt, 1,210 i.u., 25 gm. lots, 9d. per gm.; 100 gm., 8d.; 1 kilo, £25. Synthetic *dl*, 1,000 units per gm., the prices are 8d., 5d. and £18 for the same quantities.

### Crude Drugs

AGAR.—Kobé No. 1, 23s. 6d. per lb. in bond; shipment, 23s. 6d., c.i.f.

ANISE.—Chinese STAR, 150s. per cwt. spot, duty paid, f.a.q. for shipment, 120s., c.i.f.

ANNATTO.—Madras, f.a.q. seeds, spot, 255s. per cwt.

BALSAMS.—(Per lb.): CANADA: Shipment, 28s., c.i.f.; spot, 28s. 6d. COPAIBA: B.P.C. spot, 13s.; shipment, 9s., c.i.f.; PERU: remains firm at 18s., spot; shipment, 17s. 6d., c.i.f.; TOLU: B.P., from 12s. 6d.

BELLADONNA.—LEAVES, 5s. per lb., spot; shipment, October-November new crop, 4s. 6d. c.i.f. HERB, 3s. 6d., spot. ROOT, 1s. 8d. per lb., spot; shipment, 1s. 7d., c.i.f.

BENZOIN.—Sumatra block, spot from £20 to £40 as to quality.

BUCHU.—Spot, 8s. 6d. per lb.; shipment cleared.

CALUMBA.—Mozambique root, 125s. per cwt. spot.

CAMPOR.—B.P. powder for shipment, 4s. 4½d. per lb., c.i.f.; spot, 5s. 9d., duty paid.

CHAMOMILE.—Belgian flowers, 15s. to 16s. per lb., spot; German type, 7s. 6d.

CHERRY BARK.—Thin natural, on spot from 3s. 4d. per lb.; shipment 3s. 3d. c.i.f.

CHILLIES.—Zanzibar, spot, 380s. per cwt., shipment, 300s., c.i.f.; Mombasa, 400s., spot; shipment, 360s., c.i.f.

CINNAMON.—Bark, Seychelles, 135s. cwt. cwt. spot; shipment, 107s. 6d., c.i.f.; QUILLS (c.i.f., per lb.) Ceylon; 50's, 10s. 3d.; firsts, 9s. 2d.; seconds, 9s.; quillings, 5s. 4d.

CLOVES.—Zanzibar, standard grade, spot quoted at 2s. 10½d. per lb.; shipment, 2s. 7½d. c.i.f.

COCILLANA.—Bark, 3s. to 3s. 3d. per lb., as to holder.

COCHINEAL.—(Per lb.) Canary Isle silver-grey, 15s. 6d. spot, 14s. 6d. c.i.f.; black brilliant, 17s. 6d., spot, 16s. 6d., c.i.f. Peruvian silver-grey, 13s., spot, and 12s. 6d., c.i.f.

COLOCYNTH PULP.—Spot offered at 4s. 3d. per lb., shipment, 4s. c.i.f.

DANDELION.—Root is 160s. per cwt., spot.

ERGOT.—Portuguese—Spanish, spot, 11s. per lb.; shipment, 10s. 6d., c.i.f., nominal, Continental, 9s., spot.

GINGER.—(Per cwt.). Nigerian split, 75s., spot; c.i.f. not offering; peeled, 195s., spot and 165s., c.i.f. African, spot, 225s., shipment, 210s., c.i.f. Jamaican No. 3, spot, 270s., shipment, not offering; Cochín, spot, 220s.; shipment, 180s., c.i.f.

MERCURY.—Spot £165 per flask of 76-lb., ex warehouse.

PEPPER.—White Sarawak, 3s. 6½d. per lb. spot; shipment, 3s. 5½d. c.i.f. Black Sarawak, 2s. 11d. spot; shipment, 2s. 8d. c.i.f. Black Brazilian grade one, 3s. 1½d., duty paid; Black Malabar, 320s. c.i.f.

SEEDS.—(per cwt.). ANISE.—Turkish 187s. 6d. duty paid. CARAWAY.—Dutch 152s. 6d., spot. CELERY.—Indian 150s., spot; shipment, new crop 135s., c.i.f. CORIANDER.—Spot Moroccan 97s. 6d. Rumanian

whole 92s. 6d., splits, 80s., all duty paid, shipment Moroccan, 89s., c.i.f. CUMIN.—Spot Cyprian, 290s.; Indian 292s. 6d.; Moroccan 295s., duty paid; shipment Cyprian 240s. c.i.f.; Iranian 195s., c.i.f. DILL.—Indian 112s. 6d., spot; shipment 80s., c.i.f. FENNEL.—Chinese, 125s., duty paid; shipment, Chinese, 110s., c.i.f.; Indian 120s., c.i.f. FENUGREEK.—Moroccan, 80s., duty paid; shipment, 67s. 6d., c.i.f. MUSTARD.—English, new crop, 65s. to 90s., according to quality.

TUMERIC.—Madras ginger quoted at 100s. per cwt., spot; shipment, 85s. c.i.f.

### Essential and Expressed Oils

ANISE.—Chinese 9s. 4d., spot, shipment 8s. 11d. c.i.f.

BAV.—From 41s. per lb. on the spot.

BERGAMOT.—Spot, from 140s. per lb.

BIRCH TAR.—Rectified 10s. lb. on the spot.

BOIS DE ROSE.—Brazilian spot, 18s. 6d., per lb.; shipment, nominal.

BUCHU.—Spot, from 370s. to 400s. per lb.

CALAMUS.—Spot from 55s. to 60s. per lb.

CAMPOR, WHITE.—Chinese for shipment, 4s. 4d., c.i.f., per kilo; spot 2s. 6d. lb., duty paid.

CANANGA.—Spot from 32s. 6d. per lb.

CINNAMON.—English-distilled, 50s. per oz.; other B.P. oils from 22s. to 130s. per lb. Ceylon leaf, 23s.; Seychelles leaf rectified from 9s. 9d., spot.

EUCALYPTUS.—Chinese, 80-85 per cent., 9s. 6d. per kilo spot; shipment, 9s. 1½d., c.i.f.

FENNEL.—Spanish sweet, 16s. per lb., duty paid.

GERANIUM.—Bourbon, 87s. 6d. to 92s. 6d., spot; Algerian, 75s.

GINGER.—Imported (per lb.): Indian, 165s.; Chinese, 75s.; Jamaican, 132s. 6d.

GRAPEFRUIT.—Spot quoted at 7s. per lb. Floridan, 10s., West Indian unobtainable on spot.

JUNIPER.—B.P.C. is 38s. per lb.

JUNIPER WOOD.—From 6s. per lb.

LAVANDIN.—From 21s. 6d. per lb., as to quality.

LIME.—West Indian distilled, 73s.-74s. per lb. on the spot.

PIMENTO.—Imported BERRY, 110s.; English distilled, 390s.; LEAF, 24s. per lb.

SPEARMINT.—American oil on the spot, 74s. per lb. Chinese, spot, 72s. 6d. per kilo, shipment 71s. per kilo, c.i.f.

VETIVERI.—Bourbon, spot, 85s. per lb.

YLANG YLANG.—Best oil quoted about 135s.

### UNITED STATES REPORT

NEW YORK, OCTOBER 11: Among CRUDE DRUGS, spot prices of TOLU BALSAM 50 cents higher at \$5.50 to \$6.25 per lb. Supplies are scarce and prices are strictly nominal. In FINE CHEMICALS a sharp decline of about 50 cents per lb. in the price of BRAZILIAN MENTHOL. Duty paid prices range from \$5.00 to \$5.10 per lb. Among ESSENTIAL OILS, mint oil prices are generally firm, especially those of NATURAL PEPPERMINT, up about 25 cents at \$6.25 to \$7.15 per lb., an exception to the trend is PATCHOULI, showing a loss of 60 to 75 cents at spot prices of \$13.00 to \$14.50 per lb.



## TRADE MARKS

### APPLICATIONS ADVERTISED BEFORE REGISTRATION

"Trade Marks Journal," October 5, No. 4597

For chemical substances for use in the manufacture of perfumes (1)

FLORANYL, 893,809, by Proprietary Perfumes, Ltd., Ashford, Kent.

For common soap and detergents (not for use in industrial and manufacturing processes) (3)

MISTY, 857,544, by Procter & Gamble, Ltd., Gosforth, Newcastle upon Tyne.

For cosmetics, none being in liquid form (3)

MISTY COLOUR MAGIC, 858,108, by Rayette Beauty Products, Ltd., Slough, Bucks.

For perfumes, cosmetics, hair lotions and toilet preparations (non-medicated), none being saponaceous or in liquid form (3)

MISTY MAGIC SECRET, 860,402, by Rayette Beauty Products, Ltd., Slough, Bucks.

For eye cosmetics, none being in liquid form (3)

MISTY BRITE EYES, 860,953, by Rayette Beauty Products, Ltd., Slough, Bucks.

For perfumes, cosmetics and non-medicated toilet preparations, but not including skin creams (3)

GIFT OF LIFE, B888,999, by Richard Estrin, New York, U.S.A.

For cosmetic preparations for the care of the skin (3)

YARDLEY CLEARSKIN, 891,315, by Yardley & Co., Ltd., London, W.1.

For sun-tanning preparation, being non-medicated toilet preparations (3)

C.W.S. SCREEN, 891,592, by Co-operative Wholesale Society, Ltd., Manchester.

For perfumes, non-medicated toilet preparations, cosmetic preparations, dentifrices, depilatory preparations, toilet articles, sachets for use in waving the hair, shampoos, soaps and essential oils (3)

FREELANCE, 891,827, by Beecham Group, Ltd., Brentford, Middlesex.

For soaps, perfumes, cosmetics, non-medicated toilet preparations, hair lotions, hair creams, hair pomades and dentifrices (3) and for medicated hair preparations, deodorants, sanitary preparations and substances and medicated preparations for the skin and scalp (5)

AQUASPA, 885,794-95, by Britanol, Ltd., Horsforth, Leeds.

For all goods (3) and (5)

RACASAN BLUE-FLUSH, 893,150-51, by Racasan, Ltd., Ellesmere Port, Ches.

For bandages and medical and surgical dressings, all made of plastics; and plastics for use in dentistry (5)

PALOSSA, 857,566, by Kulzer and Co., G.m.b.H., Bad Hamburg, Van der Hole, Germany.

For deodorants, none being in liquid form (5)

MISTY FRESH'N COOL, 862,477, by Rayette Beauty Products, Ltd., Slough, Bucks.

For pharmaceutical preparations for the treatment of biliary disorders (5)

ARISTACHOL, 873,914, by Deutsche Arzneimittel Gesellschaft Steiner & Co., Berlin, 46, Germany.

For pharmaceutical and veterinary preparations (5)

LOFTYL, 877,626, by Abbott Laboratories, North Chicago, Illinois, U.S.A. C-TRON, B884,460, by Laboratoires Sauter, S.A., Geneva, Switzerland.

For pharmaceutical preparations for the treatment of the nails (5)

CRISTAL VISION, B886,443, by Guerlain, Ltd., Perivale, Greenford, Middlesex.

For pharmaceutical preparations and substances (5)

STANBY, B886,897, LIFTAL, B888,217, MEGAGESIC, FORTAGESIC, 890,966-67, by Sterwin, A.G., Zug, Switzerland. FINACILLIN, 894,045, NORCILLIN, 894,047, by Beecham Group, Ltd., Brentford, Middlesex. MICRO FORTE (MICRO 40), 891,025, by W. B. Cartwright, Ltd., Larkfield, Rawdon, Nr. Leeds. MYDOLIN, 893,491, by A. Wander, Ltd., London, W.1. GRAVATOSE,

893,812, by Ex-Lax, Ltd., Slough, Bucks. BELOC, 894,011, by A. B. Astra, Apotekarnes Kemiska Fabriker, Södertälje, Sweden.

For pharmaceutical preparations and substances for human and veterinary use (5)

E.S.B.E.-3, B889,431, by CIBA, Ltd., Basle, Switzerland.

For pharmaceutical, veterinary and sanitary preparations and substances; disinfectants; preparations for killing weeds and destroying vermin (5)

TWYDIL, 890,480, by Twyford Laboratories, Ltd., London, N.W.10.

For medicinal and pharmaceutical preparations (5)

DONULAN, 890,886, by Novo Industri, A.S. Copenhagen, N., Denmark.

For veterinary preparations; vitamin and mineral supplements for addition to animal foods (5)

PERVINAL, 891,560, by U.S. Vitamin & Pharmaceutical Corporation, New York, U.S.A.

For pharmaceutical, veterinary and sanitary substances (5)

FANIDAR, 893,699, by Roche Products, Ltd., Welwyn Garden City, Herts.

For deodorants and anti-perspirants (5)

IMPEL, 896,533, by Southern Aerosol Co., Ltd., Hove, 3, Sussex.

For razors and parts and fittings; razor blades (8)

Device with words ROYAL OAK, B888,695, by Philip Morris, Inc., New York, U.S.A.

For sunglasses (9)

GALA, 878,519, by Gala of London, Ltd., London, W.1. and Surbiton, Surrey.

For optical, photographic and cinematographic apparatus; and parts; etc. (9)

BLUE SPOT, B883,201, by Blaupunkt-Werke, G.m.b.H., Hildesheim, Germany.

For dark-room lamps (photographic) flash-lamps for photographic purposes; and parts and fittings (9)

Device with word KANDEM, 890,879, by Körting & Mathiesen, G.m.b.H., Limburg/Lahn, Germany.

For hearing aids for the deaf and audiometers (10)

QUALITONE, 884,138, by Seeburg Corporation, Minneapolis, 16, Minnesota, U.S.A.

For surgical and medical apparatus (10)

RIDDOHALER, 895,863, by Riddell Products, Ltd., London, E.2.

For toilet paper (non-medicated) (16)

PLOVER, 896,245, by Nurdin & Peacock, Ltd., London, S.W.20.

## PATENTS

### COMPLETE SPECIFICATIONS ACCEPTED From the "Official Journal (Patents)," October 5

Baby's feeding bottle. F. M. Duerme, 1,048,208.

Steroid compounds, composition incorporating them and processes for their preparation. Roussel-Uclaf, 1,048,231.

Steroid compounds and processes for their preparation. Roussel-Uclaf, 1,048,232.

Production of quaternary chloro alkylammonium salts. Badische Anilin- & Soda Fabrik, A.G. 1,048,234.

$\Delta^1$ -Androstenes and  $\Delta^2$ -androstadienes and process for their production. Syntex Corporation, 1,048,246.

Electric razor. R. W. Thompson, 1,048,247.

Fertilizers. Fisons Horticulture, Ltd. 1,048,254.

17 $\alpha$ -Chlorethynyl-17 $\beta$ -alkoxy steroids and process for the preparation thereof. British Drug Houses, Ltd. 1,048,255.

Processing for preparing 5-nitrofuryl compounds. Toyama Kagaku Kogyo, K.K. 1,048,266.

Process for the production of concentrated complex fertilizers. Rumanian Ministry for the Petroleum & Chemical Industry. 1,048,269.

Ion exchange resin. General Electric Co. 1,048,273.

Cation exchange resin. General Electric Co. 1,048,274.

Photographic camera. Kodak Ltd. 1,048,280.

Phosphorus-containing sulphonamides. Stauffer Chemical Co. 1,048,320.

Cosmetic applicators. Spatz Corporation. 1,048,339.

Indoles. Merck & Co., Inc. 1,048,346.

3-Halo-acetyl indoles. Merck & Co., Inc. 1,048,347.

Exposure meter for a camera. Nippon Kogaku, K.K. 1,048,365.

Accessory shoe arrangement for photographic cameras. Balda-Kamerawerk Rudolf Grüter, K.G. 1,048,368.

Photographic apparatus. International Polaroid Corporation. 1,048,395.

Analgesic and antipyretic compositions containing *n*-acetyl-para-aminophenol. Laboratoire Solac. 1,048,407.

Stabilised aqueous injectable solutions of indocyanine dyestuffs. Deutsche Akademie der Wissenschaften zu Berlin. 1,048,419.

Photographic cameras and electronic flash guns. Voigtlander, A.G. 1,048,486.

Fungicidal compositions. Berlin-Chemie Veb. 1,048,507.

6-methyl- and 1,6-dimethyl-ergoline 1 derivatives. Soc. Farmaceutici Italia. 1,048,555.

Dry-shaver housings. Philips Electronic & Associated Industries, Ltd. 1,048,644.

Phenthiazine derivatives. Rhone-Poulenc, S.A. 1,048,680.

Fungicides. E. I. Du Pont de Nemours & Co. 1,048,736.

Desiccation of biological matter. Laboratoire de Recherches Experimentales Goulden et Cie. 1,048,761.

Photographic cameras. Coronet, Ltd. 1,048,768.

British patent specifications relating to the above will be obtainable, (price 4s. 6d. each) from the Patent Office, 23 Southampton Buildings, Chancery Lane, London, W.C.2, from November 16.

## NEW COMPANIES

P.C. = Private Company. R.O. = Registered Office.

BROADLEY CHEMISTS, LTD. (P.C.). — Capital £100. To carry on the business of manufacturing, dispensing, and general chemists, etc. Directors: Wilfred Broadley, M.P.S., and Mrs. Ethel D. Simons. R.O.: 36 Crown Road, Norwich.

CARNABY STEET COSMETICS, LTD. (P.C.). — Capital £100. Subscribers: Muriel Goldstein and Brian Goldstein, 25 The Glade, Ilford.

KEYNAVET (RETAIL), LTD. (P.C.). — Capital £100. To carry on the business of manufacturers of and dealers in veterinary drugs, vaccines and medicines, etc. Directors: Thomas A. Indge and Hilda G. Indge. R.O.: 6 High Street, Keynsham, Bristol.

MUSE GROUP, LTD. (P.C.). — Capital £400. To acquire not less than 90 per cent. of the issued share capital of Practical Pharmaceutical, Ltd., Brunton Chemists, Ltd., Kee Detergents, Ltd., and Folio Pharmaceutica, Ltd., etc. Subscribers: A. Kane and R. Mallons. The first directors are to be appointed by the subscribers.

SALMET (CHEMICALS), LTD. (P.C.). — Capital £5,000. To carry on the business of manufacturers of and dealers in chemicals, etc. Directors: David Lumb and Anthony J. Walters. R.O.: Battlefield, Shrewsbury.

STONEHART & HANCOX, LTD. (P.C.). — Capital £100. To carry on the business of physicists, chemists, etc. Subscribers: Wm. C. Gardner, 3 Carlton Close, Chessington, Surrey, and H. H. Wells.

WEALD VETERINARY SUPPLIES, LTD. (P.C.). — Capital £6,000. Subscribers: Muriel Goldstein and Brian Goldstein, 25 The Glade, Ilford.

## WILLS

Mr. J. A. JONES, M.P.S., 1 The Northern Road, Great Crosby, Liverpool, left £11,035 (£10,231 net).

Mr. O. KING, M.P.S., 5 High Street, Broadstairs, Kent, left £1,263 (£1,210 net).

Mr. A. F. W. POLLARD, M.P.S., 593 Wandsworth Road, London, S.W.8, left £37,916 (£35,914 net).



## PRINT AND PUBLICITY

### Gift Bags for Christmas

DAILY printed Christmas bags, with string carrying handle, are being offered by Rimmel, Ltd., 140 Tottenham Court Road, London, W.1, to enable stockists to make up gift sets to customers' requirements, from the company's Beauty on a Budget series. A 20-p. booklet introduces the series to customers and a leaflet sets out twenty-three suggested gift packs at prices from 3s. 8d. to 10s. 2d.

### PRESS ADVERTISING

ORGANON LABORATORIES, LTD., Crown House, Morden, Surrey: Endocil foundation cream. In national consumer Press.

PHILLIPS YEAST PRODUCTS, LTD., Park Royal Road, London, N.W.10: Phillips tonic yeast. In national Sunday newspapers and women's magazines.

### PUBLICATIONS

#### Booklets and Leaflets

MONSANTO CHEMICALS, LTD., Monsanto House, 10 Victoria Street, London, S.W.1: "Salicylanide" (4-page descriptive folder).



ELEGANT: Counter display unit for the new UltraLucent collection of make-up by Max Factor, Hollywood and London (Sales), Ltd., 16 Old Bond Street, London, W.1.

## PHOTOGRAPHIC NOTES

**A Change of Distributor.**—Olympus camera equipment, hitherto handled by Pullin Photographic, is now being distributed by David Williams (Cine Equipment), Ltd., 5 Glasshouse Yard, London, E.C.1.

**Tripod Adaptor.**—Polaroid (U.K.), Ltd., Rosanne House, Welwyn Garden City, Herts, have introduced a small tripod adaptor No. 194, to the range of accessories for the models 103 and 104 Colour Pack cameras. The adaptor slips into place on the base of the camera bodies. Its price is 7s. 11d.

**Now with Zoom Lens.**—From September 5, the Instamatic M70-L cine projector and dual-gauge Instamatic M80-L projector of Kodak, Ltd., Kodak House, Kingsway, London, W.C.2, are being supplied fitted with Kodak zoom projection lens, 20-32-mm. f/1.5 replacing the 28-mm. f/1.5 lens originally supplied.

## COMING EVENTS

Items for inclusion under this heading should be sent in time to reach the Editor not later than first post on Wednesday of week of insertion.

### Sunday, October 16

NATIONAL PHARMACEUTICAL UNION, School of Pharmacy, University of London, Brunswick Square, London, W.C.1, at 2.30 p.m. Branch representatives' conference. (Change of venue).

### Monday, October 17

ENFIELD CHEMISTS' ASSOCIATION, Enfield Arms hotel, Enfield, at 7.45 p.m. Speaker from G. D. Searle & Co., Ltd. on "Oral Contraception" (illustrated by film).

FINCHLEY BRANCH, PHARMACEUTICAL SOCIETY, Southgate Club, 17 Chase Side, London, N.14, at 8 p.m. Dr. E. R. Rees, (senior consulting gynaecologist, Wembley and District Group of Hospitals) on "The Pill." (Change of venue).

HARROW, HOUNSLOW AND WEMBLEY BRANCHES, PHARMACEUTICAL SOCIETY, Wellcome Building, Euston Road, London, N.W.1, at 7 p.m. Visit to the Wellcome Historical Medical Library and Museum and film.

"MEDICINES — WITH CARE" EXHIBITION, Ebbsay hall, Ashley Road, Epsom, 11 a.m. — 7 p.m. (Friday until 9 p.m. Saturday 10 a.m. — 1 p.m.) Until October 22.

NORTH STAFFORDSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Medical institute, Hartshill, Stoke-on-Trent, at 7.45 p.m. Mr. W. M. Darling (chairman, Ethical Committee of the Society) on "Current Problems of Ethics and Practice."

ROMFORD BRANCH, PHARMACEUTICAL SOCIETY, Plough Inn, Gallows Corner, Romford, at 7.45 p.m. Mr. W. Duffey, (health education officer, Greater London Borough of Havering) on "The Position of the Pharmacist in Health Education."

PESTICIDES GROUP, SOCIETY OF CHEMICAL INDUSTRY, 14 Belgrave Square, London, S.W.1, at 5 p.m. Dr. D. Price-Jones (Imperial Chemical Industries, Ltd.) on "New Horizons in Insect Control."

### Tuesday, October 18

BIRKENHEAD BRANCH, PHARMACEUTICAL SOCIETY, Wellington hotel, Hamilton Street, Birkenhead, at 8 p.m. Teach-In, "The Next Ten Years."

CARDIFF BRANCH, NATIONAL PHARMACEUTICAL UNION, Park hotel, Cardiff, at 8 p.m. Mr. J. O. Bond (a member of the Executive) on "Investing £15,000."

COVENTRY AND WARWICKSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Fletch hotel, Fletchamstead Highway, Coventry, at 8 p.m. Formulation of Branch resolutions, followed by film.

NORTH STAFFORDSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Medical institute, Hartshill, Stoke-on-Trent, at 8 p.m. Dr. A. V. McVey on "Tranquillisers and Sedatives in anaesthesia" (lecture series).

NORTHUMBERLAND AND GATESHEAD BRANCH, NATIONAL PHARMACEUTICAL UNION, Avon hotel, Osborne Road, Newcastle upon Tyne, 2, at 7.30 p.m. Demonstration of cosmetics and hair tinting, arranged by Max Factor, Hollywood and London (Sales), Ltd., and Clairol, Ltd.

OXFORDSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Nielsen House, Headington, Oxford, at 8 p.m. Dr. S. B. Challen (School of Pharmacy, Portsmouth College of Technology) on "Pharmacy and the Canadian Scene."

SCIENCE COMMITTEE, ROYAL DUBLIN SOCIETY, Ballsbridge, Dublin, Eire. Scientific and technical exhibition. Until October 20.

WEST KENT BRANCH, PHARMACEUTICAL SOCIETY, Bull's Head hotel, Chislehurst, at 8 p.m. Mr. G. F. Clarke (Geigy (U.K.), Ltd.) on "The Role of the Inflammatory Process in Healing."

### Wednesday, October 19

AGRICULTURAL AND VETERINARY PHARMACY GROUP PHARMACEUTICAL SOCIETY, visits, at

2 p.m. to Carworth, Europe, Alconbury, at 2.30 p.m. to Huntingdon Research Centre, Alconbury, at 4 p.m. to Houghton Poultry Research Station, Houghton. Followed at 7.30 p.m. by a meeting of the Group at the George hotel, Huntingdon. Speakers: Messrs. P. L. Long, E. G. Harry and Dr. R. F. Gordon.

BOURNEMOUTH BRANCH, PHARMACEUTICAL SOCIETY, Cornelia nurses' hostel, Poole, at 1.15 p.m. Dr. W. Hindle on "Steatorrhoea;" at Post-graduate medical centre, Boscombe, Mrs. A. Parkes on "Human Chromosome Analysis."

BOURNEMOUTH AND SOUTHAMPTON BRANCHES, PHARMACEUTICAL SOCIETY, Rose and Crown hotel, Brockenhurst, at 7.30 p.m. Annual inter-branch skittles match. (Change of venue.)

CAMBRIDGE AND HUNTINGDON BRANCH, PHARMACEUTICAL SOCIETY, Post graduate lecture theatre, Addenbrooke's hospital, Trumpington Street, Cambridge, at 8 p.m. Dr. H. F. Grundy (lecturer in pharmacology, University of Cambridge) on "The Blood Pressure and its Therapeutic Adjustment" (lecture series).

CHELTENHAM BRANCH PHARMACEUTICAL SOCIETY AND GLOUCESTERSHIRE BRANCH, BRITISH DENTAL ASSOCIATION, Farmers club, Agricultural house, Sandhurst Lane, Tewkesbury, at 8 p.m. Speaker: Professor F. E. Camps (professor of forensic medicine, University of London).

LEEDS BRANCH, PHARMACEUTICAL SOCIETY, Parkway hotel, Leeds, at 7.30 p.m. Annual dinner and dance. Tickets (price 40s. each) are obtainable from Mr. W. Howarth, 1 Wortley Road, Arminley, Leeds, 12.

LEICESTER AND LEICESTERSHIRE BRANCH, PHARMACEUTICAL SOCIETY, Bell hotel, Leicester, at 7.30 p.m. Discussion of Council policy on advertising and branch reorganisation.

MANCHESTER PHARMACEUTICAL GOLFING SOCIETY, Withington golf club, Palatine Road, Manchester, 20. Stableford competition for President's prize, and prize distribution.

TEES-SIDE BRANCH, PHARMACEUTICAL SOCIETY, Billingham Arms hotel, Billingham, at 8.15 p.m. Annual ball.

### Thursday, October 20

BEDFORD BRANCH, PHARMACEUTICAL SOCIETY, Cross Keys hotel, Pulloxhill, at 8 p.m. Professor G. E. Trease, on "Pharmacy in the Middle Ages."

CHELTENHAM BRANCH, PHARMACEUTICAL SOCIETY, Queen's hotel, Cheltenham, at 8.30 p.m. Annual ball.

DUNDEE AND EASTERN SCOTTISH BRANCH, PHARMACEUTICAL SOCIETY, Queen's hotel, Dundee, at 7.30 p.m. Mr. J. B. Baird (secretary, Insurance Institute of Dundee) on "Insurance for You."

EAST METROPOLITAN BRANCH, PHARMACEUTICAL SOCIETY AND WEST HAM ASSOCIATION OF PHARMACISTS, Roebuck hotel, Roebuck Lane, Buckhurst Hill, at 8 p.m. Social evening.

LEEDS BRANCH, NATIONAL PHARMACEUTICAL UNION, Griffin hotel, Boar Lane, Leeds, at 7.30 p.m. G. T. M. David (a member of the Executive) on "Marketing."

LONDON BRANCH, GUILD OF PUBLIC PHARMACISTS, Chelsea College of Science and Technology, Manresa Road, London, S.W.3, at 7 p.m. Dr. M. P. Earles on "The history of Chelsea College" followed by a tour of the School of Pharmacy.

MANCHESTER PHARMACEUTICAL ASSOCIATION, Extra-mural department, University of Manchester, Roscoe Theatre, Brunswick Street, Manchester, at 8 p.m. Student prize presentation by Mr. D. C. Buchanan and address on "Future Career Possibilities."

SHEFFIELD BRANCH, PHARMACEUTICAL SOCIETY, Royal Victoria hotel, Sheffield, at 7 p.m. Dinner and dance.

### Friday, October 21

IPSWICH AND SUFFOLK BRANCH, PHARMACEUTICAL SOCIETY, Civic College, Rope Walk, Ipswich, at 7.30 p.m. Professor F. E. Camps (professor of forensic medicine, London University), on "Poisoning — Accident, Suicide or Murder?" (Refresher course).



# Prescribers' Press

What doctors are reading about developments in drugs and treatments

THE claim that acetylsalicylic acid is devoid of any haematotoxic effect can no longer be upheld, say workers at the University of Groningen, Holland. They report on five cases in which aspirin was demonstrably associated with pancytopenia (a reduction in all the cellular elements of the blood). All the patients were women and they admitted to having ingested amounts of aspirin estimated to range from 1.5 to 20 kilos over periods up to fifty years. All had macrocytic anaemia, leucopenia with relative lymphocytosis, and thrombocytopenia. The anaemia could not be explained by deficiency of folic acid, vitamin B<sub>12</sub>, or iron. In each case the blood picture returned to normal or near normal after aspirin was discontinued. A "provocation" test performed in two patients produced a decrease in the platelet count and, in one patient, a decrease in the white-blood-cell count. Removal of the drug again resulted in a rapid improvement in the blood picture. Although peripheral destruction of platelets (indicated by the rapid fall in platelet count) is usually the result of hypersensitivity, the authors could find no specific antibodies to blood cells. Patch tests on three patients were also negative. However, the authors do not rule out an immunological basis for the pancytopenia as such tests are often negative in patients with hypersensitivity to aspirin. (*Lancet*, October 8, p. 768.)

A WORTH-while clinical improvement in twelve of twenty patients with moderately severe rheumatoid arthritis treated with two fibrinolytic drugs, phenformin and ethyloestrenol, is reported from Gloucestershire Royal Hospital, Gloucester. The treatment was started on the hypothesis that persistence of fibrin is of pathogenic importance in chronic inflammation and the two drugs were used in the hope that the anabolic steroid might act synergistically with the diguanide on fibrinolysis. Phenformin was given as slow-release capsules in a dosage of 100 mgm. daily and ethyloestrenol in dosages of 8 or 16 mgm. daily. Laboratory findings tended to show an improvement before the clinical improvement was apparent and when the treatment was interrupted for one month in five patients there was in each case a laboratory relapse, and a clinical relapse in three. The patients recovered when treatment was resumed. The authors say that the pattern of change suggests that fibrinolytic drugs promote improvement in rheumatoid arthritis by hastening removal of fibrin from the inflamed tissues and that a vicious cycle of deposition of fibrin and elevation of plasma fibrinogen may be an essential feature of the disease. (*Lancet*, October 8, p. 757.)

DIAZEPAM is recommended as a useful drug in the management of tetanus by the authors of two papers. In this context the compound is being used for its muscle-relaxant properties. Workers at University College Hospital, Ibadan, have carried out a therapeutic trial on 149 children (104 neonates and forty-five older children) and have found that although the mortality rate was unaffected in neonatal tetanus, the drug was of value

in relieving tonic muscle spasm. In older children mortality rates were lower, though not significantly so. Experience in forty-two cases reported from Lagos University Teaching Hospital showed that 10 mgm. of diazepam intravenously could abolish spasm within two minutes, the effect lasting for up to one hour. Phenobarbitone was found a useful adjuvant to sustain the muscle-relaxant effect. (*B.M.J.*, October 8, pp. 860 and 862.)

## CONTEMPORARY THEMES

Subjects of contributions in current medical and technical publications

- PENTAPEPTIDE DERIVATIVE OF GASTRIN. Specific stimulation of gastric secretion by. *J. Pharm. Pharmacol.*, October, p. 633.
- POLYOXYETHYLENE COMPOUNDS. The effects of, on the hydrolysis of chlorbutol, *J. Pharm. Pharmacol.*, October, p. 640.
- RHEUMATOID ARTHRITIS. Fibrinolytic treatment of, with phenformin plus ethyloestrenol. *Lancet*, October 8, p. 757.
- ACETYSALICYLIC ACID as a cause of pancytopenia from bone-marrow damage. *Lancet*, October 8, p. 768.
- CHOLESTYRAMINE. Porphyrin-binding effect of. *Lancet*, October 8, p. 780.
- DIAZEPAM. Report of a therapeutic trial of, in tetanus in childhood. *Brit. med. J.*, October 8, p. 860.
- ANTICOAGULANTS in congestive heart failure. *Brit. med. J.*, October 8, p. 866.
- TECHNIQUE for self-administration of heparin. *Brit. med. J.*, October 8, p. 883.
- DIAZEPAM. Experience with, in tetanus. *Brit. med. J.*, October 8, p. 862.
- FUNGUS INFECTIONS OF THE FEET. The biology of. *J. Amer. med. Ass.*, September 19, p. 1017.
- PHARMOLOGICALLY ACTIVE PEPTIDES produced in the tissues of the host during chronic trypanosome infections. *Nature*, October 8, p. 190.
- N - AMIDINO-3,5-DIAMINO-6-CHLOROPYRAZINECARBOXAMIDE: an active diuretic in the carboxamide series. *Nature*, October 8, p. 191.

## COMMERCIAL TELEVISION

The information given in the table is of number of appearances and total screen time in seconds. Thus 7/105 means that the advertiser's announcement will, during the week covered, be screened seven times and for a total of 105 seconds.

Period—October 23-29

PRODUCT	London	Midland	North	Scotland	Wales & West	South	North-East	Anglia	Ulster	Westward	Border	Grampian	Eireann	Channel Is.
Alka Seltzer ...	5/200	5/200	5/200	5/200	8/300	5/200	8/300	5/200	5/200	5/200	5/200	5/200	5/200	5/200
Anadin ...	2/60	4/74	2/60	2/60	3/44	2/60	1/30	1/30	2/60	2/60	2/60	2/60	—	—
Askit powders and tablets ...	—	—	—	7/49	—	—	—	—	—	—	3/21	2/14	—	—
Bisodol ...	—	—	—	—	—	—	—	—	7/35	—	—	3/21	—	—
Disprin ...	1/15	—	1/15	1/15	—	1/15	2/45	1/15	2/45	—	1/15	3/60	—	2/30
Dr. Wernets denture powder	—	—	—	—	—	2/60	1/30	—	1/30	—	—	—	—	—
Endocil ...	—	—	—	—	—	4/120	3/90	—	—	—	—	—	—	—
Euthymol tooth-paste ...	1/40	1/30	1/30	1/30	1/40	1/30	1/40	1/40	1/30	1/30	2/60	1/40	—	—
Farex products ...	—	3/90	—	—	—	—	—	—	—	—	—	—	—	—
Fennings junior aspirins ...	—	—	4/60	—	—	—	—	—	—	—	—	—	—	—
Fiery Jack ...	—	—	3/29	—	2/30	—	3/37	—	—	—	—	—	—	—
Hill's sore throat lozenges ...	—	—	3/45	—	—	—	—	—	—	—	—	—	—	—
Imperial Leather ...	4/120	3/90	5/150	3/90	4/120	4/120	3/90	5/150	2/60	4/120	2/60	3/90	—	—
Lemon Nulon ...	—	—	—	—	—	1/30	2/60	—	1/30	6/180	1/30	1/30	—	1/30
Loxene shampoo ...	3/90	3/90	2/60	2/60	2/60	2/60	2/60	2/60	3/90	2/60	2/60	2/60	—	—
Moorland indigestion tablets	—	1/45	—	—	—	—	—	—	—	—	—	—	—	—
Nair ...	—	—	—	—	—	—	—	—	—	—	—	—	2/30	—
Nulon ...	—	—	—	—	1/30	1/30	1/30	1/30	1/30	5/150	1/30	2/60	—	1/30
Ostermilk ...	—	3/90	—	—	—	—	—	—	—	—	—	—	—	—
Penetrol inhalant ...	—	2/14	2/14	—	1/7	—	1/7	1/7	—	—	—	—	—	—
Radox ...	3/90	3/90	3/90	3/90	3/90	3/90	3/90	3/90	—	—	—	—	—	3/90
San Izal bleach ...	—	—	—	—	—	3/30	—	—	—	—	—	—	—	—
Simpkin's JuiCees ...	—	—	—	4/120	—	—	—	—	—	—	—	—	—	—
Sparkling Spring ...	1/30	2/60	2/60	2/60	2/60	2/60	2/60	1/30	1/30	2/60	2/60	3/90	—	3/90
Topsy baby cream ...	—	—	3/45	—	—	—	—	—	—	—	—	—	—	—
Vitalis ...	—	1/30	1/30	1/30	1/30	—	1/30	1/30	1/30	—	—	1/30	—	—
Wonderset ...	—	—	—	—	—	1/15	1/15	1/15	1/15	1/15	1/15	1/15	—	1/15
Wright's coal tar soap	1/15	1/15	1/15	1/15	1/15	1/15	1/15	1/15	—	1/15	1/15	1/15	—	—



# cumulative price changes

AMENDING C & D  
QUARTERLY PRICE LIST  
FOR OCTOBER 1966

<b>Albion-Culver (1437 ACC)</b> C Set gel 32 0 8 9½ 4 11 <b>Alex. (681 K)</b> Alex. (109 BCL) cream tin 1oz 8 6 2 4 1 3 jar 1½oz — — — — mixture — — — — (1053 Rexall) ch pastilles 17 6 4 9½ 2 6 <b>Philippe (48 AP)</b> bath and (747 Leo)ts4B aoules 1500 i.u. 27 53 0 14 7 7 11 3 23 0ea — 30 8 10 75 9ea — 101 0 3000 i.u. 3 44 0ea — 58 8 10 135 0ea — 193 4				<b>Fabulous hair spray</b> 4oz. 64 4 17 8 9 6 <b>hair lacquer</b> 68cc 23 8 6 6 3 6 junior 30cc 15 4 4 2½ 2 3 refill 30cc 8 6 2 4 1 3 50cc 13 8 3 9 2 0 68cc 16 0 4 5 2 4 <b>aerosol</b> 5oz 40 0 11 0 5 11 12oz 60 8 16 8 8 11 crystal clear 4oz 30 8 8 5 4 6 <b>hair spray aerosol</b> 5oz 40 0 11 0 5 11 50cc 13 0 3 7 1 11 100cc 19 8 5 5 2 11 <b>hand cream</b> 50cc 13 0 3 7 1 11 100cc 19 8 5 5 2 11 <b>hand and body cream</b> 150cc 26 4 7 3 3 11 <b>Mediterranean sun</b> 5oz 45 8 12 7 6 6 <b>spray</b> 20cc 13 8 3 9 1 0 <b>set</b> 20cc (2 doz.) 4 8 2 6 50cc 17 0 4 8 2 6				<b>Extil (394 DF)ts7</b> linctus 5oz 60 0 16 6 8 10½ tablets 25 60 0 16 6 8 10½ 250 43 4ea 11 11ea — <b>Flambeau (1444 Faberge)</b> Flambeau (1587 RFL) <b>Footoids (175 BCP)</b> powder 2½oz 18 4 5 1 2 7 tablets 36 18 4 5 1 2 7 <b>Galaton (1303 Wander)ts4B</b> cough suppressant 6oz 42 0 — 5 3 1litre 204 0 — 25 6 <b>Gestatin (917 Organon)ts4B</b> tablets 5mgm 100 43 10ea — 65 9 <b>Gloss (30 CA&amp;C)</b> hair lubricant 62 0 17 0 9 6 <b>Glucagon (413 Lilly)</b> ampoule 10mgm dry powder with 10mls diluent 45 0ea — 67 6 <b>Glymiel (1351 WLU)</b> protective hand cream 13 9 3 9½ 2 1 20 7 5 8 3 1 <b>Gremlins (175 BCP)</b> tablets 28 10 10 3 0 1 7 <b>Honeyjels (175 BCP)</b> vitamin sweets trial 8 7 1 5 1 1 4oz 20 0 3 4 2 5 8oz 39 0 6 5 4 7 <b>Impact (1569 SAC)</b> hair spray 6oz 24 0 6 6 3 6 8oz 29 0 7 9 4 3 16oz 41 0 11 0 5 11 18oz 46 0 12 4 6 11 <b>Impact (1569 SAC)</b> hair lustre 4oz 45 0 12 1 6 11 18oz 134 0 35 11 20 0 <b>Impress (1569 SAC)</b> hair spray 8oz 36 0 9 8 5 11 18oz 70 0 18 9 10 6 <b>Impulse (1569 SAC)</b> fragrance aerosol 2½oz 75 0 20 1 11 0 <b>Indibran (175 BCP)</b> Indian brandee 12 8 3 6 1 9 21 6 5 11 2 11 <b>Infonutrol (68 AH)</b> <b>Incimate (1052 Revlon)</b> Silk of Intimate 151 3 41 7 23 0 <b>Isovon (859 Moore)</b> metered spray 122 0 — — refill 96 0 — — <b>Kapulast (681 K)</b> <b>Kapulast (109 BCL)</b> first aid dressings waterproof tin 3 2 — 6 strip 3 0 — 6 waterproof 2 6 — 4 <b>Kemazoids (175 BCP)</b> 20 20 0 8 2 6 <b>Kodak (711 Kodak)</b> roll films Kodacolor-X 127, 120, 620 59 0 16 0 7 4 828 50 0 14 0 6 4 Ektachrome high speed and type B 120 88 0 24 0 11 0 Ektachrome-X 127, 120, 620 64 0 18 0 8 0 Kodachrome II 828-12 10 9ea 1 4ea 14 4 miniature film Kodacolor-X 135 cassette (12 exp) 55 0 15 0 6 11 (20 exp) 68 0 19 0 8 6 Kodapak (12 exp) 63 0 17 0 7 10 Ektachrome 135 cassette high speed and type B (20 exp) 125 0 34 0 15 7			
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**'EMPRAZIL' tablets**  
**UNCOMMON RELIEF for the COMMON COLD**  
 BURROUGHS WELLCOME & CO. (The Wellcome Foundation Ltd.) LONDON





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Philippe (48AP)										Skelton's influenza										Fleeing Moment (Balenciaga (480 FP) existing entry									
de brand										mix										Fleeing Moment (Balenciaga (480 FP) existing entry									
plumed										vegetable cough										Fleeing Moment (Balenciaga (480 FP) existing entry									
16oz 136 0										remover										Fleeing Moment (Balenciaga (480 FP) existing entry									
16oz 136 0										worm seed syrup										Fleeing Moment (Balenciaga (480 FP) existing entry									
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## AMENDMENTS AND ADDITIONS TO KEY TO SUPPLIERS

141 Blyton=Blyton, Astley & Co., Ltd., Crown C  
Works, Ramsgate Street, Salford, 7, Lancs. Black  
9848.

395 D & SL=Dunkelman & Son, Ltd., Desboro  
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